# Case 16-40837 Doc 1 Filed 12/30/16 Entered 12/30/16 15:55:30 Desc Main Document Page 1 of 53

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | ■ Chapter 7                   |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this ar amended filing |

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself   |  |   |
|-----|--|--|---|
|     |  | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name   |  |   |
|     | Write the name that is on  | Dale                                     |   |
|     | your government-issued picture identification (for example, your driver's            | First name                               | First name                                    |
|     | license or passport).  | Middle name                              | Middle name                                   |
|     | Bring your picture   | Lewis                                    |   |
|     | dentification to your neeting with the trustee.                                      | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
|     |  |  |   |
| 2.  | All other names you have used in the last 8 years                                    |  |   |
|     | Include your married or maiden names.  |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer | xxx-xx-8126                              |   |
|     | Identification number<br>(ITIN)  |  |   |

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Case number (if known)

Debtor 1 Dale Lewis

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 8501 S State Chicago, IL 60619 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Dale Lewis

| Par  | Tell the Court About   | our Bar  | nkruptcy Ca | se   |                     |                   |                           |   |  |
|--|--|--|-------------|--|---------------------|-------------------|---------------------------|---|--|
| 7.   | The chapter of the Bankruptcy Code you are   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  □ Chapter 7 |             |  |                     |                   |                           |   |  |
|  | choosing to file under   |  |             |  |                     |                   |                           |   |  |
|  |  | ☐ Cha  | apter 11    |  |                     |                   |                           |   |  |
|  |  | ☐ Cha  | apter 12    |  |                     |                   |                           |   |  |
|  |  | ☐ Cha  | apter 13    |  |                     |                   |                           |   |  |
|  |  |  |             |  |                     |                   |                           |   |  |
| 8.   | How you will pay the fee   | a<br>0   | bout how yo | u may pay. Typically, attorney is submitting         | if you are paying t | he fee yourself,  | , you may pay with cash   | r local court for more details<br>a, cashier's check, or money<br>a a credit card or check with |  |
|  |  |  |             | the fee in installme<br>e in Installments (Offic     |                     | this option, sign | n and attach the Applica  | ation for Individuals to Pay  |  |
| ☐ I request that my fee be waived (You may request this option only if you |  |  |             |  |                     |                   |                           |   |  |
|  |  |  |             |  |                     |                   |                           | of the official poverty line that this option, you must fill out                                |  |
|  |  |  |             |  |                     |                   | rm 103B) and file it with |   |  |
|  |  |  |             |  |                     |                   |                           |   |  |
| 9.   | Have you filed for bankruptcy within the   | □ No.  |             |  |                     |                   |                           |   |  |
|  | last 8 years?  | ■ Yes.   | District    | NDIL   | When                | 5/03/11           | Casa number               | 11-19042DC  |  |
|  |  |  | District    | NDIL   | When                | 5/03/11           | Case number  Case number  |   |  |
|  |  |  | District    |  | When                |                   | Case number               |   |  |
|  |  |  | Diotriot    |  |                     |                   | Case names                |   |  |
| 10.  | Are any bankruptcy   | ■ No   |             |  |                     |                   |                           |   |  |
|  | cases pending or being filed by a spouse who is  | ☐ Yes.   |             |  |                     |                   |                           |   |  |
|  | not filling this case with<br>you, or by a business<br>partner, or by an<br>affiliate? |  |             |  |                     |                   |                           |   |  |
|  |  |  | Debtor      |  |                     |                   | Relationship to y         | ou  |  |
|  |  |  | District    |  | When                |                   | Case number, if           | known   |  |
|  |  |  | Debtor      |  |                     |                   | Relationship to y         | ou  |  |
|  |  |  | District    |  | When                |                   | Case number, if           | known   |  |
| 11   | Do you rent your   | Пы   | Go to li    | ne 12  |                     |                   |                           |   |  |
| • • •  | residence?   | □ No.  | Haarra      |  | an eviction judame  | nt against you s  | and do you want to stay   | in your residence?  |  |
|  |  | Yes.   |             |  | an eviction judgme  | in against you o  | and do you want to stay   | m your rediderice:  |  |
|  |  |  |             | No. Go to line 12.                                   |                     |                   |                           |   |  |
|  |  |  |             | Yes. Fill out <i>Initial St</i> bankruptcy petition. | atement About an    | Eviction Judgm    | ent Against You (Form     | 101A) and file it with this   |  |

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| Deb   | tor 1                                    | Dale Lewis   |                        |  | Document                             | . ιαί        | yc <del>4</del> 01 3 | Case number       | (if known)      |                |          |          |
|---|--|--|------------------------|--|--------------------------------------|--------------|----------------------|-------------------|-----------------|----------------|----------|----------|
|   |  |  |                        |  |                                      |              |                      |                   |                 |                |          |          |
| Part  | t 3:                                     | Report About Any Bu  | sinesses               | You Own  | as a Sole Proprietor                 |              |                      |                   |                 |                |          |          |
| 12.   | Are v                                    | ou a sole proprietor   |                        |  |                                      |              |                      |                   |                 |                |          |          |
|   | of an                                    | y full- or part-time<br>ness?  | □ No.                  | Go to  | Part 4.                              |              |                      |                   |                 |                |          |          |
|   |  |  | Yes.                   | Name   | and location of busines              | SS           |                      |                   |                 |                |          |          |
|   |  | e proprietorship is a  |                        |  |                                      |              |                      |                   |                 |                |          |          |
|   |  | ess you operate as<br>dividual, and is not a                                       |                        | DJ   | of husiness if any                   |              |                      |                   |                 |                |          |          |
|   | separ<br>as a d                          | rate legal entity such corporation, ership, or LLC.                                |                        | Name   | e of business, if any                |              |                      |                   |                 |                |          |          |
|   |  | have more than one proprietorship, use a   |                        |  |                                      |              |                      |                   |                 |                |          |          |
|   |  | ate sheet and attach   |                        | Numb   | er, Street, City, State &            | ZIP Code     |                      |                   |                 |                |          |          |
|   | it to th                                 | nis petition.  |                        |  | k the appropriate box to             |              |                      |                   |                 |                |          |          |
| Health Care Business (as defined in 11 U.S.C. § 101(27A)) |  |  |                        |  |                                      |              |                      |                   |                 |                |          |          |
|   |  |  |                        |  | Single Asset Real Est                | ,            |                      | - , ,,            |                 |                |          |          |
|   |  |  |                        |  | Stockbroker (as define               |              | - ,                  | .,                |                 |                |          |          |
|   |  |  |                        |  | Commodity Broker (a                  | s defined ir | n 11 U.S.C. {        | § 101(6))         |                 |                |          |          |
|   |  |  |                        |  | None of the above                    |              |                      |                   |                 |                |          |          |
| 13.   | Chap<br>Bank                             | ou filing under<br>ter 11 of the<br>ruptcy Code and are<br>a small business<br>or? | deadline:<br>operation | are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropries. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statements, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process. S.C. 1116(1)(B). |                                      |              |                      |                   |                 |                | ement of |          |
|   | For a                                    | definition of small  | ■ No.                  | I am r   | not filing under Chapter             | 11.          |                      |                   |                 |                |          |          |
|   | busin                                    | ess debtor, see 11<br>C. § 101(51D).   | □ No.                  | I am filing under Chapter 11, but I am NOT a small business debtor according to the definit Code.  |                                      |              |                      |                   | ne definition i | in the Ban     | kruptcy  |          |
|   |  |  | ☐ Yes.                 | I am f   | iling under Chapter 11 a             | and I am a   | small busine         | ess debtor accord | ing to the def  | inition in the | Bankrupt | cy Code. |
| Part  | : 1.                                     | Penort if You Own or   | Have Any               | , Hazardo  | ous Property or Any Pr               | operty Th    | at Noods Im          | amediate Attentio | an an           |                |          |          |
|   |  | ou own or have any   |                        | riazarac   | as i roporty of Any i i              | operty The   | ut Necus III         | modiate Attenti   |                 |                |          |          |
| 17.   | prop                                     | erty that poses or is  | ■ No.                  |  |                                      |              |                      |                   |                 |                |          |          |
|   | •  | ed to pose a threat minent and   | ☐ Yes.                 | What is  | the hazard?                          |              |                      |                   |                 |                |          |          |
|   | ident                                    | ifiable hazard to  |                        |  |                                      |              |                      |                   |                 |                |          |          |
|   |  | c health or safety?<br>you own any   |                        |  |                                      |              |                      |                   |                 |                |          |          |
|   | property that needs immediate attention? |  |                        |  | diate attention is why is it needed? |              |                      |                   |                 |                |          |          |
|   | For e                                    | xample, do you own   |                        |  |                                      |              |                      |                   |                 |                |          |          |
|   | perisi<br>livest<br>or a b               | hable goods, or ock that must be fed, ouilding that needs of repairs?              |                        | Where is   | s the property?                      |              |                      |                   |                 |                |          |          |
|   | _  |  |                        |  |                                      |              |                      |                   |                 |                |          |          |

Number, Street, City, State & Zip Code

Document Dale Lewis

#### 15. Tell the court whether you have received a briefing about credit counseling.

Debtor 1

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb  | tor 1 | Dale Lewis                               |                   | Docume   |                                | Case number                             | er (if known)   |
|------|-------|--|-------------------|--|--------------------------------|---|---|
| Part | 6:    | Answer These Questi                      | ons for Rep       | orting Purposes  |                                |   |   |
| 16.  |       | kind of debts do nave?                   | 16a. <i>i</i>     | ned in 11 U.S.C. § 101(8) as "incurred by an                 |                                |   |   |
|      |       |  | I                 | ☐ No. Go to line 16b.  |                                |   |   |
|      |       |  | ı                 | Yes. Go to line 17.  |                                |   |   |
|      |       |  |                   | Are your debts primarily bu                                  |                                |   |   |
|      |       |  |                   | ☐ No. Go to line 16c.  | -                              |   |   |
|      |       |  | [                 | Yes. Go to line 17.  |                                |   |   |
|      |       |  | 16c. S            | State the type of debts you o                                | we that are not consu          | mer debts or busines                    | ss debts  |
| 17.  |       | vou filing under                         | □ No. I           | am not filing under Chapter                                  | 7. Go to line 18.              |   |   |
|      | after | ou estimate that any exempt              |                   | am filing under Chapter 7. E                                 |                                |   | perty is excluded and administrative expenses?  |
|      |       | erty is excluded and nistrative expenses | ı                 | □No  |                                |   |   |
|      | are p | aid that funds will<br>ailable for       |                   | ■ Yes  |                                |   |   |
|      | distr | ibution to unsecured itors?              | •                 | <b>-</b> 165   |                                |   |   |
| 18.  | How   | many Creditors do                        | <b>=</b> 4.40     |  | □ 1,000-5,000                  | <b>.</b>                                | ☐ 25,001-50,000   |
|      | you e | estimate that you                        | ■ 1-49<br>□ 50-99 |  | ☐ 1,000-3,000<br>☐ 5001-10,000 |   | ☐ 50,001-100,000  |
|      | owe'  | ?  | ☐ 100-199         | )  | <b>1</b> 0,001-25,0            | 000                                     | ☐ More than100,000  |
|      |       |  | □ 200-999         | )  |                                |   |   |
| 19.  |       | much do you                              | <b>\$0 - \$50</b> | 0.000  | □ \$1,000,001                  | - \$10 million                          | ☐ \$500,000,001 - \$1 billion   |
|      |       | nate your assets to<br>orth?             |                   | - \$100,000  | □ \$10,000,00°                 |   | □ \$1,000,000,001 - \$10 billion  |
|      |       |  |                   | 1 - \$500,000  |                                | 1 - \$100 million<br>01 - \$500 million | ☐ \$10,000,000,001 - \$50 billion<br>☐ More than \$50 billion                           |
|      |       |  | □ \$500,00        | 1 - \$1 million  | <b>—</b> \$100,000,00          | στ - φ300 million                       | I More than \$50 billion  |
| 20.  |       | much do you                              | <b>\$0 - \$50</b> | ),000  | □ \$1,000,001                  | - \$10 million                          | ☐ \$500,000,001 - \$1 billion   |
|      | estin | nate your liabilities<br>?               | □ \$50,00         | 1 - \$100,000  | \$10,000,001                   |   | \$1,000,000,001 - \$10 billion  |
|      |       |  |                   | 11 - \$500,000<br>11 - \$1 million                           |                                | 1 - \$100 million<br>01 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion                              |
|      |       |  | <b>—</b> \$500,00 | 01 - \$1 million   |                                |   | — More than 900 billion   |
| Part | 7:    | Sign Below                               |                   |  |                                |   |   |
| For  | you   |  | I have exa        | nined this petition, and I dec                               | lare under penalty of p        | perjury that the inforr                 | mation provided is true and correct.  |
|      |       |  |                   |  |                                |   | under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.            |
|      |       |  |                   | ey represents me and I did n<br>I have obtained and read the |                                |   | at an attorney to help me fill out this   |
|      |       |  | I request re      | lief in accordance with the c                                | hapter of title 11, Unit       | ed States Code, spe                     | cified in this petition.  |
|      |       |  |                   | case can result in fines up t                                |                                |   | or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519, |
|      |       |  | Dale Lew          | is   |                                | Signature of Debto                      | r 2   |
|      |       |  | Signature of      | of Debtor 1  |                                |   |   |
|      |       |  | Executed of       |  |                                | Executed on                             |   |
|      |       |  |                   | MM / DD / YYYY   |                                | MM                                      | I / DD / YYYY   |

Debtor 1 Dale Lewis Document Page 7 of 53 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Julie Gleason                      | Date          | December 30, 2016  |
|--|---------------|--------------------|
| Signature of Attorney for Debtor       | <u> </u>      | MM / DD / YYYY     |
| I II al                                |               |                    |
| Julie Gleason                          |               |                    |
| Printed name                           |               |                    |
| Gleason & Gleason                      |               |                    |
| Firm name                              |               |                    |
| 77 W Washington, Ste 1218              |               |                    |
| Chicago, IL 60602                      |               |                    |
| Number, Street, City, State & ZIP Code |               |                    |
| Contact phone (312) 578-9530           | Email address | troy@chicagobk.com |
| 6273536                                |               |                    |
| Bar number & State                     |               |                    |

|                           |                       | <u>, i i auc o oi 33</u>  |  |
|---------------------------|-----------------------|---|--|
| rmation to identify your  | case:                 |   |  |
| Dale Lewis                |                       |   |  |
| First Name                | Middle Name           | Last Name   |  |
|                           |                       |   |  |
| First Name                | Middle Name           | Last Name   |  |
| Sankruptcy Court for the: | NORTHERN DISTRICT     | OF ILLINOIS   |  |
|                           |                       |   |  |
|                           | Dale Lewis First Name | Trmation to identify your case:  Dale Lewis  First Name  Middle Name  First Name  Middle Name | Dale Lewis       First Name     Middle Name     Last Name       First Name     Middle Name     Last Name |

☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your as      | ssets<br>f what you own |
|-----|--|--------------|-------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$           | 0.00                    |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 6,310.00                |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 6,310.00                |
| Par | t 2: Summarize Your Liabilities  |              |                         |
|     |  |              | abilities<br>t you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 7,906.00                |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$           | 0.00                    |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 17,862.00               |
|     | Your total liabilities   | \$           | 25,768.00               |
| Par | t 3: Summarize Your Income and Expenses  |              |                         |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 4,084.48                |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 4,058.00                |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |              |                         |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ır other sch | nedules.                |
| 7.  | ■ Yes What kind of debt do you have?   |              |                         |
|     |  |              |                         |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Dale Lewis Document Page 9 of 53 Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

\$\_\_\_\_\_\_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

Page 10 of 53 Document Fill in this information to identify your case and this filing: Debtor 1 **Dale Lewis** Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Lexus Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: **RX 330** Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2005 Debtor 2 only Current value of the Current value of the 170000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another **NADA** \$4,900.00 \$4,900.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$4,900.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

| Debtor 1                            | Case 16-4  Dale Lewis  | .0837 Do                              |              | iled 12/30/16<br>Document | Page 11 of 53              | 0/16 15:55:30<br>ase number (if known) | Desc Main                        |
|-------------------------------------|--|---------------------------------------|--------------|---------------------------|----------------------------|--|----------------------------------|
| ■ Yes.                              | Describe   |                                       |              |                           |                            |  |                                  |
|                                     |  | Misc. Housel<br>tables, chairs        |              | •                         | rniture, kitchen appl      | iances,                                | \$900.00                         |
| □ No                                | les: Televisions an  | d radios; audio,<br>ohones, cameras   |              |                           | ipment; computers, printe  | ers, scanners; music                   | collections; electronic devices  |
|                                     |  | Misc. Consul<br>Games, Vide           |              |                           | ng TV's, Phones, Cor       | mputers,                               | \$300.00                         |
| Exampl ■ No                         |  | igurines; paintin<br>ns, memorabilia, |              |                           | ooks, pictures, or other a | rt objects; stamp, coiı                | n, or baseball card collections; |
| Exampl  No                          | ent for sports an<br>les: Sports, photog<br>musical instru<br>Describe | raphic, exercise                      | e, and other | r hobby equipment;        | bicycles, pool tables, go  | olf clubs, skis; canoes                | and kayaks; carpentry tools;     |
| ■ No                                |  | shotguns, amm                         | nunition, an | nd related equipmer       | nt                         |  |                                  |
| □ No                                |  | thes, furs, leathe                    | er coats, de | esigner wear, shoes       | s, accessories             |  |                                  |
|                                     |  | Used Clothin                          | ng           |                           |                            |  | \$150.00                         |
| □ No                                | ,  | relry, costume je                     | welry, eng   | agement rings, wed        | dding rings, heirloom jew  | elry, watches, gems,                   | gold, silver                     |
|                                     |  | Misc. Costun                          | ne Jewel     | ry                        |                            |  | \$50.00                          |
| Examp  ■ No □ Yes.  14. Any ot ■ No | orm animals boles: Dogs, cats, b Describe her personal and             | l household iter                      | ms you did   | d not already list,       | including any health aid   | ds you did not list                    |                                  |
|                                     |  |                                       |              | Part 3, including a       | any entries for pages yo   | ou have attached                       | \$1,400.00                       |

Part 4: Describe Your Financial Assets

page 2

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Case number (if known) Debtor 1 **Dale Lewis** Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash on Hand \$10.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Checking Account w/Wellsfargo [Overdrawn] \$0.00 17.1. Savings Account w/Wells Fargo [ Exactly \$0.00 17.2. Zero1 17.3. 5/3 [Exactly Zero] \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... % of ownership: Name of entity: DJ Business Just started - no profits yet \$0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans  $\square$  Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

|    |                 | Case 1  | 6-40837  | Doc 1                        | Filed 12/30/16<br>Document                           | Entered 12/30/16 15:55:30<br>Page 13 of 53             | Desc Main  |
|----|-----------------|---|--|------------------------------|--|--|--|
| De | ebtor 1         | Dale Lewi                                     | is   |                              | Boodinone  | Case number (if known)                                 |  |
|    | ☐ Yes           |   | Issuer name                                      | and descripti                | on.  |  |  |
|    |                 |   | <b>ation IRA, in</b> a<br>1), 529A(b), ar        |                              | n a qualified ABLE pro                               | ogram, or under a qualified state tuition pro          | ogram.   |
|    | ☐ Yes           |   | Institution na                                   | me and desc                  | ription. Separately file th                          | ne records of any interests.11 U.S.C. § 521(c)         |  |
|    | ■ No            |   | future intere                                    |                              | rty (other than anythin                              | g listed in line 1), and rights or powers exe          | ercisable for your benefit   |
|    | Examp<br>■ No   | les: Internet o                               | domain names                                     | s, websites, pr              | ts, and other intellecturoceeds from royalties a     | al property and licensing agreements                   |  |
|    |                 | ·   | information al                                   |                              |  |  |  |
|    | Examp<br>■ No   | les: Building                                 | es, and other of permits, exclusion al           | sive licenses,               |  | n holdings, liquor licenses, professional licens       | es   |
| Mo | oney or p       | oroperty owe                                  | ed to you?                                       |                              |  |  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|    | ■ No            | unds owed t                                   |  | oout them, inc               | luding whether you alre                              | ady filed the returns and the tax years                |  |
|    | ■ No            | les: Past due                                 | or lump sum                                      |                              | usal support, child suppo                            | ort, maintenance, divorce settlement, property         | settlement   |
|    |                 | <i>les:</i> Unpaid w                          | neone owes y<br>vages, disabilit<br>unpaid loans | ty insurance p               | •  | efits, sick pay, vacation pay, workers' compe          | nsation, Social Security   |
|    | ☐ Yes.          | Give specific                                 | information                                      |                              |  |  |  |
|    |                 | <b>ts in insuran</b><br><i>les:</i> Health, d |  | e insurance; h               | ealth savings account (                              | HSA); credit, homeowner's, or renter's insural         | nce  |
|    | Yes. I          | Name the ins                                  |  | nny of each po<br>pany name: | olicy and list its value.                            | Beneficiary:   | Surrender or refund value:   |
|    |                 |   |  | n Life Insur<br>Noyer - No   | ance Policy w/<br>CSV                                |  | \$0.00   |
|    | If you a someon | are the benefi<br>ne has died.                |  |                              | someone who has die<br>t proceeds from a life in     | ed<br>surance policy, or are currently entitled to rec | eive property because  |
|    | Examp<br>■ No   | les: Accident                                 |  |                              | rou have filed a lawsui<br>surance claims, or rights | it or made a demand for payment<br>s to sue            |  |

| Debt           | or 1          | Dale Lewis  | Document                           | Page 14 of               | Case number (if known)              |            |
|----------------|---------------|---|------------------------------------|--------------------------|-------------------------------------|------------|
| 34 <b>O</b>    | ther c        | contingent and unliquidated cla                                       | aims of every nature, including    | ng counterclaims         | of the debtor and rights to set off | claims     |
|                | No            |   | o. o. o. y o,o                     | .9                       |                                     |            |
|                | Yes.          | Describe each claim   |                                    |                          |                                     |            |
| 35. <b>A</b>   | nv fin        | ancial assets you did not alrea                                       | ndv list                           |                          |                                     |            |
|                | No            |   | ,                                  |                          |                                     |            |
|                | Yes.          | Give specific information   |                                    |                          |                                     |            |
|                |               | he dollar value of all of your er<br>art 4. Write that number here    |                                    |                          |                                     | \$10.00    |
| Part 5         | De:           | scribe Any Business-Related Prope                                     | erty You Own or Have an Interest   | In. List any real esta   | ate in Part 1.                      |            |
| 37. <b>D</b> o | you c         | own or have any legal or equitable                                    | interest in any business-related p | property?                |                                     |            |
|                | No. Go        | to Part 6.  |                                    |                          |                                     |            |
|                | Yes. G        | Go to line 38.  |                                    |                          |                                     |            |
| _              |               |   |                                    |                          |                                     |            |
| Part 6         |               | scribe Any Farm- and Commercial ou own or have an interest in farmlan |                                    | n or Have an Interes     | st In.                              |            |
| 46. <b>D</b>   | o you         | own or have any legal or equi   | table interest in any farm- or     | commercial fishir        | ng-related property?                |            |
| ı              | No.           | Go to Part 7.   |                                    |                          |                                     |            |
| [              | ☐ Yes.        | . Go to line 47.  |                                    |                          |                                     |            |
|                |               |   |                                    |                          |                                     |            |
| Part 7         | 7:            | Describe All Property You Own o                                       | r Have an Interest in That You Di  | d Not List Above         |                                     |            |
|                |               | have other property of any kir<br>bles: Season tickets, country club  |                                    |                          |                                     |            |
|                | -xarrıç<br>No | nes. Season lickets, country club                                     | membership                         |                          |                                     |            |
| _              |               | Give specific information   |                                    |                          |                                     |            |
|                |               | ·   |                                    |                          |                                     |            |
| 54.            | Add t         | he dollar value of all of your er                                     | ntries from Part 7. Write that i   | number here              |                                     | \$0.00     |
| Part 8         | 3:            | List the Totals of Each Part of this                                  | Form                               |                          |                                     |            |
|                |               |   |                                    |                          |                                     |            |
|                |               | : Total real estate, line 2<br>2: Total vehicles, line 5              |                                    | ¢4 000 00                | ······                              | \$0.00     |
|                |               | :: Total vernoles, line 5<br>:: Total personal and househol           | d items, line 15                   | \$4,900.00<br>\$1,400.00 |                                     |            |
|                |               | l: Total financial assets, line 36                                    |                                    | \$10.00                  |                                     |            |
|                |               | 5: Total business-related prope                                       | _                                  | \$0.00                   |                                     |            |
|                |               | 6: Total farm- and fishing-relate                                     |                                    | \$0.00                   |                                     |            |
|                |               | : Total other property not liste                                      | _                                  | \$0.00                   |                                     |            |
| 62.            | Total         | personal property. Add lines 56                                       | through 61                         | \$6,310.00               | Copy personal property total        | \$6,310.00 |
|                |               | of all property on Schedule A/  | _                                  | , <del>-</del> _         |                                     |            |
| UJ.            | ı Ulal        | or an property on Schedule A/   | ■. Aud iiiie oo + iiiie o∠         |                          |                                     | \$6,310.00 |

Official Form 106A/B Schedule A/B: Property page 5

|                     |                          | DUGUITE           | III FAUE TO OLDO |                       |
|---------------------|--------------------------|-------------------|------------------|-----------------------|
| Fill in this infor  | mation to identify your  | case:             |                  |                       |
| Debtor 1            | Dale Lewis               |                   |                  |                       |
|                     | First Name               | Middle Name       | Last Name        |                       |
| Debtor 2            |                          |                   |                  |                       |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name        |                       |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |                       |
| Case number         |                          |                   |                  |                       |
| (if known)          |                          |                   |                  | ☐ Check if this is an |
|                     |                          |                   |                  | amended filing        |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property                                 | Current value of the portion you own | Am  | ount of the exemption you claim                                 | Specific laws that allow exemption |
|---|--------------------------------------|-----|---|------------------------------------|
|   | Copy the value from<br>Schedule A/B  | Che | eck only one box for each exemption.                            |                                    |
| 2005 Lexus RX 330 170000 miles<br>NADA                                | \$4,900.00                           |     | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Line from Schedule A/B: 3.1   |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Misc. Household Goods (bedroom furniture, kitchen appliances, tables, | \$900.00                             |     | \$900.00  | 735 ILCS 5/12-1001(b)              |
| chairs, sofas, etc.) Line from Schedule A/B: 6.1                      |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Used Clothing Line from Schedule A/B: 11.1                            | \$150.00                             |     | 100%  | 735 ILCS 5/12-1001(a)              |
| Line Holli Schedule Arb. 11.1   |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Misc. Costume Jewelry Line from Schedule A/B: 12.1                    | \$50.00                              |     | \$50.00   | 735 ILCS 5/12-1001(b)              |
| Life from Schedule A/D. 12.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Cash on Hand Line from Schedule A/B: 16.1                             | \$10.00                              |     | \$10.00   | 735 ILCS 5/12-1001(b)              |
| Line nom Soneddie A/B. 10.1   |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |

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Case number (if known)

|    | 24.0 2011.0   |                                      |         |   |                                    |
|----|---|--------------------------------------|---------|---|------------------------------------|
|    | Brief description of the property and line on Schedule A/B that lists this property   | Current value of the portion you own | Am      | ount of the exemption you claim                                 | Specific laws that allow exemption |
|    |   | Copy the value from<br>Schedule A/B  | Che     | eck only one box for each exemption.                            |                                    |
|    | Checking Account w/Wellsfargo [Overdrawn]   | \$0.00                               |         | \$0.00  | 735 ILCS 5/12-1001(b)              |
|    | Line from Schedule A/B: 17.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Savings Account w/Wells Fargo [ Exactly Zero]   | \$0.00                               |         | \$0.00  | 735 ILCS 5/12-1001(b)              |
|    | Line from Schedule A/B: 17.2  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No |                                      |         | led on or after the date of adjustme                            | nt.)                               |
|    | <ul><li>☐ Yes. Did you acquire the property cove</li><li>☐ No</li></ul>               | red by the exemption wi              | ithin 1 | ,215 days before you filed this case                            | ?                                  |
|    | <u> </u>  |                                      |         |   |                                    |
|    | ☐ Yes   |                                      |         |   |                                    |

|         | Case                               | e 16-40837  | Doc 1             | Filed 12<br>Docu     | 2/30/16          | Entere<br>Page 1 | ed 12/30/16  | 15:55      | :30 Desc M                                      | 1ain                        |
|---------|------------------------------------|---|-------------------|----------------------|------------------|------------------|--|------------|---|-----------------------------|
| Fill    | in this informat                   | tion to identify you                                | r case:           | DOGG                 |                  |                  | 7 (11 33   |            |   |                             |
| Deb     | tor 1                              | Dale Lewis  |                   |                      |                  |                  |  |            |   |                             |
|         | -                                  | First Name  | Mi                | iddle Name           |                  | Last Name        |  |            |   |                             |
|         | tor 2<br>use if, filing)           | First Name  | Mi                | iddle Name           |                  | Last Name        |  |            |   |                             |
| Unit    | ed States Bankr                    | ruptcy Court for the:                               | NORTI             | HERN DISTR           | RICT OF ILL      | INOIS            |  |            |   |                             |
|         | e number                           |   |                   |                      |                  |                  |  |            |   |                             |
| (if kno | own)                               |   |                   |                      |                  |                  |  |            | _   | if this is an<br>led filing |
|         | cial Form of hedule D              | : Creditors   | Who               | Have C               | laims :          | Secure           | d by Prop  | erty       |   | 12/15                       |
| s nee   |                                    | ccurate as possible. I<br>dditional Page, fill it c |                   |                      |                  |                  |  |            |   |                             |
| . Do    | any creditors ha                   | ve claims secured by                                | your prope        | erty?                |                  |                  |  |            |   |                             |
|         | □ No. Check th                     | is box and submit th                                | is form to        | the court with       | your other       | schedules. \     | ou have nothing                                    | else to re | eport on this form.                             |                             |
|         | Yes. Fill in all                   | l of the information b                              | elow.             |                      |                  |                  |  |            |   |                             |
| Part    | 1: List All S                      | Secured Claims                                      |                   |                      |                  |                  |  |            |   |                             |
| 2. Li   |                                    | ims. If a creditor has n                            | nore than on      | ne secured clain     | m. list the cre  | ditor separate   | Column A   | C          | Column B  | Column C                    |
| for e   | ach claim. If more                 | than one creditor has<br>he claims in alphabetic    | a particular      | claim, list the o    | ther creditors   | in Part 2. As    | Amount of cla<br>Do not deduct<br>value of collate | the th     | alue of collateral<br>nat supports this<br>laim | Unsecured portion If any    |
| 2.1     | Wfds/wds                           |   | Describe t        | the property th      | nat secures t    | he claim:        | \$7,906  |            | \$4,900.00                                      | \$3,006.00                  |
|         | Creditor's Name                    |   | 2005 Le<br>NADA   | xus RX 330           | 1 <b>70000</b> n | niles            |  |            |   |                             |
|         | Po Box 1697<br>Winterville,        |   | As of the dapply. | date you file, the   | he claim is:     | Check all that   |  |            |   |                             |
|         | Number, Street, Cit                | y, State & Zip Code                                 | ☐ Unliqui         |                      |                  |                  |  |            |   |                             |
|         |                                    |   | ☐ Dispute         |                      |                  |                  |  |            |   |                             |
| Who     | owes the debt                      | ? Check one.  | Nature of         | lien. Check all      | I that apply.    |                  |  |            |   |                             |
| _       | ebtor 1 only<br>ebtor 2 only       |   | An agre           | eement you ma<br>an) | de (such as r    | mortgage or se   | ecured   |            |   |                             |
|         | ebtor 2 only<br>bebtor 1 and Debto | or 2 only   | ☐ Statuto         | ry lien (such as     | tax lien. med    | chanic's lien)   |  |            |   |                             |
| _       |                                    | debtors and another                                 | _                 | ent lien from a l    |                  |                  |  |            |   |                             |
|         | check if this claim                |   | _                 | including a right    |                  |                  |  |            |   |                             |
|         |                                    | Opened<br>04/16 Last                                |                   |                      |                  |                  |  |            |   |                             |

Add the dollar value of your entries in Column A on this page. Write that number here: \$7,906.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$7,906.00

Last 4 digits of account number

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Active

Date debt was incurred 11/01/16

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

2452

|                           | Ca   | 3C 10-40031 L                                  |  |  |            | of 53  | , Desc                            | iviaiii                                 |
|---------------------------|--|--|--|--|------------|--|-----------------------------------|---|
| Fill ir                   | n this inform                                    | nation to identify your                        |  | AGUIIICIII I AU                                      | C. 10      | OF 33  |                                   |   |
| Debto                     | or 1   | Dale Lewis                                     |  |  |            |  |                                   |   |
| DODI                      | J1 1   | First Name                                     | Middle Name                                | Last Na  | ame        |  |                                   |   |
| Debto                     | or 2   |  |  |  |            |  |                                   |   |
| (Spous                    | e if, filing)                                    | First Name                                     | Middle Name                                | Last Na  | ame        |  |                                   |   |
| Unite                     | d States Bar                                     | nkruptcy Court for the:                        | NORTHERN D                                 | ISTRICT OF ILLINOIS                                  |            |  |                                   |   |
| Case                      | number   |  |  |  |            |  |                                   |   |
| (if knov                  | vn)  |  |  |  |            |  | ☐ Che                             | eck if this is an                       |
|                           |  |  |  |  |            |  | ame                               | ended filing                            |
| ∩ffi∂                     | sial Form  | 106E/F   |  |  |            |  |                                   |   |
|                           |  |  | lha Haya II                                | nassurad Clair                                       | <b>~</b> ~ |  |                                   | 10/15                                   |
|                           |  | /F: Creditors W                                |  |  |            | rt 2 for creditors with NONPRI   |                                   | 12/15                                   |
| Sched<br>Sched<br>eft. At | ule G: Execut<br>ule D: Credito<br>tach the Cont | ory Contracts and Unexpors Who Have Claims Sec | ired Leases (Offici<br>ured by Property. I | al Form 106G). Do not inc<br>f more space is needed, | clude ar   | ntracts on Schedule A/B: Prop<br>ny creditors with partially secu<br>e Part you need, fill it out, num<br>not file that Part. On the top o | red claims that<br>ber the entrie | at are listed in es in the boxes on the |
| Part '                    | 1: List Al                                       | of Your PRIORITY Un                            | secured Claims                             |  |            |  |                                   |   |
| 1. D                      | o any credito                                    | rs have priority unsecure                      | d claims against y                         | ou?  |            |  |                                   |   |
|                           | No. Go to Pa                                     | art 2.   |  |  |            |  |                                   |   |
|                           | Yes.   |  |  |  |            |  |                                   |   |
| Part :                    | 2: List Al                                       | l of Your NONPRIORIT                           | Y Unsecured Cla                            | aims   |            |  |                                   |   |
| 3. D                      | o any credito                                    | rs have nonpriority unsec                      | cured claims again                         | st you?  |            |  |                                   |   |
|                           | ☐ No. You hav                                    | re nothing to report in this p                 | art. Submit this form                      | n to the court with your othe                        | er sched   | ules.  |                                   |   |
|                           | Yes.   |  |  |  |            |  |                                   |   |
| uı<br>th                  | nsecured claim                                   | n, list the creditor separately                | y for each claim. For                      | r each claim listed, identify                        | what typ   | <b>nolds each claim.</b> If a creditor have of claim it is. Do not list claims aree nonpriority unsecured claims                           | already includ                    | led in Part 1. If more                  |
|                           |  |  |  |  |            |  | Т                                 | otal claim                              |
| 4.1                       | Chase C  | Card   | La   | st 4 digits of account nur                           | mber       | 4017   |                                   | \$1,446.00                              |
|                           |  | Creditor's Name                                |  |  | -          |  | _                                 | <b>\$1,11000</b>                        |
|                           | Ро Вох   | 15298  |  |  |            | Opened 10/11 Last Acti   | ve                                |   |
|                           |  | ton, DE 19850                                  | Wi   | nen was the debt incurred                            | d?<br>_    | 11/01/16   |                                   |   |
|                           | Number St  | reet City State Zlp Code                       | As   | of the date you file, the o                          | claim is:  | Check all that apply   |                                   |   |
|                           | Who incur  | red the debt? Check one.                       |  |  |            |  |                                   |   |
|                           | Debtor   | 1 only   |  | Contingent   |            |  |                                   |   |
|                           | ☐ Debtor   | 2 only   |  | Unliquidated   |            |  |                                   |   |
|                           | ☐ Debtor   | 1 and Debtor 2 only                            |  | Disputed   |            |  |                                   |   |
|                           | _  | one of the debtors and and                     | _  | pe of NONPRIORITY unse                               | ecured o   | claim:   |                                   |   |
|                           |  | if this claim is for a comi                    |  | Student loans  |            |  |                                   |   |
|                           | debt   | n subject to offset?                           |  | Obligations arising out of a                         | a separa   | tion agreement or divorce that yo  | ou did not                        |   |
|                           | ■ No   | •  |  | • •  | -sharina   | plans, and other similar debts   |                                   |   |
|                           | ☐ Yes  |  |  | Other. Specify Credit                                |            | ,  |                                   |   |
|                           | □ res  |  |  | Otner. Specify                                       | Jaiu       |  |                                   |   |

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Debtor 1 Dale Lewis Case number (if know) 4.2 \$11,284.00 **Community Trust Cu** Last 4 digits of account number 8155 Nonpriority Creditor's Name Opened 07/07 Last Active 1313 N Skokie Hwy When was the debt incurred? 7/29/11 Gurnee, IL 60031 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Unsecured 4.3 **Convergent Outsourcing** Last 4 digits of account number 1106 \$116.00 Nonpriority Creditor's Name **Opened 06/16** 800 Sw 39th St When was the debt incurred? Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection Attorney Comcast 4.4 **Credit Coll** \$109.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 607 Norwood, MA 02062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify 06 Nationwide Insurance

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Case number (if know)

| Debioi | Dale Lewis   |  | Case number (ii know)                        |          |
|--------|--|--|--|----------|
| 4.5    | Diversified Consultant   | Last 4 digits of account number                                | 5416   | \$504.00 |
|        | Nonpriority Creditor's Name 10550 Deerwood Park Blvd   | When was the debt incurred?                                    | Opened 05/15                                 |          |
|        | Jacksonville, FL 32256  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim i                           | s: Check all that apply                      |          |
|        | Debtor 1 only  | ☐ Contingent   |  |          |
|        | ☐ Debtor 2 only  | ☐ Unliquidated   |  |          |
|        | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |
|        | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                  | d claim:                                     |          |
|        | ☐ Check if this claim is for a community   | ☐ Student loans  |  |          |
|        | debt Is the claim subject to offset?   | Obligations arising out of a sepa report as priority claims    | ration agreement or divorce that you did not |          |
|        | ■ No   | Debts to pension or profit-sharin                              | g plans, and other similar debts             |          |
|        | Yes  | Other. Specify Collection                                      | Attorney Sprint                              |          |
| 4.6    | First Premier Bank   | Last 4 digits of account number                                | 2506   | \$402.00 |
|        | Nonpriority Creditor's Name  |  | Opened 04/14 Last Active                     |          |
|        | 3820 N Louise Ave<br>Sioux Falls, SD 57107   | When was the debt incurred?                                    | 8/22/14                                      |          |
|        | Number Street City State Zlp Code  | As of the date you file, the claim i                           | s: Check all that apply                      |          |
|        | Who incurred the debt? Check one.  |  |  |          |
|        | Debtor 1 only  | ☐ Contingent   |  |          |
|        | ☐ Debtor 2 only  | ☐ Unliquidated   |  |          |
|        | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |
|        | At least one of the debtors and another  | Type of NONPRIORITY unsecured                                  | d claim:                                     |          |
|        | ☐ Check if this claim is for a community debt  | Student loans  |  |          |
|        | Is the claim subject to offset?  | Obligations arising out of a sepa<br>report as priority claims | ration agreement or divorce that you did not |          |
|        | ■ No   | Debts to pension or profit-sharin                              | g plans, and other similar debts             |          |
|        | ☐ Yes  | Other. Specify Credit Card                                     |  |          |
| 4.7    | Fst Premier  | Last 4 digits of account number                                | 5856   | \$755.00 |
|        | Nonpriority Creditor's Name  | _  |  |          |
|        | 3820 N Louise Ave<br>Sioux Falls, SD 57107   | When was the debt incurred?                                    | Opened 4/24/15 Last Active 9/30/16           |          |
|        | Number Street City State Zlp Code  | As of the date you file, the claim i                           | s: Check all that apply                      |          |
|        | Who incurred the debt? Check one.  |  |  |          |
|        | Debtor 1 only  | ☐ Contingent   |  |          |
|        | ☐ Debtor 2 only  | ☐ Unliquidated   |  |          |
|        | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |
|        | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                  | d claim:                                     |          |
|        | ☐ Check if this claim is for a community   | Student loans  |  |          |
|        | debt Is the claim subject to offset?   | report as priority claims                                      | ration agreement or divorce that you did not |          |
|        | No   | Debts to pension or profit-sharin                              |  |          |
|        | ☐ Yes  | ■ Other. Specify Credit Card                                   | l  |          |

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Case number (if know)

|     | Dale Lewis   | Case Hulliber (II kilow)  |          |
|-----|--|---|----------|
| 4.8 | I C System Inc Nonpriority Creditor's Name                                   | Last 4 digits of account number 5001  | \$670.00 |
|     | Po Box 64378<br>Saint Paul, MN 55164   | When was the debt incurred? Opened 03/13  |          |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.         | As of the date you file, the claim is: Check all that apply   |          |
|     | Debtor 1 only  | ☐ Contingent  |          |
|     | ☐ Debtor 2 only  | ☐ Unliquidated  |          |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |          |
|     | ☐ At least one of the debtors and another                                    | Type of NONPRIORITY unsecured claim:  |          |
|     | ☐ Check if this claim is for a community                                     | ☐ Student loans   |          |
|     | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |          |
|     | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |          |
|     | ☐ Yes  |   |          |
|     | ☐ Yes  | Other. Specify Collection Attorney Ntelos   |          |
| 4.9 | Illinois Dept of Employment Securit  | Last 4 digits of account number   | \$0.00   |
|     | Nonpriority Creditor's Name  Bankruptcy Unit Collection  Subdivis            | When was the debt incurred?   |          |
|     | 33 S State St 10th Floor Chicago, IL 60603 Number Street City State Zlp Code | As of the date you file the plain is: Check all that each   |          |
|     | Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply   |          |
|     | Debtor 1 only  | ☐ Contingent  |          |
|     | ☐ Debtor 2 only  | ☐ Unliquidated  |          |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |          |
|     | ☐ At least one of the debtors and another                                    | Type of NONPRIORITY unsecured claim:  |          |
|     | ☐ Check if this claim is for a community                                     | ☐ Student loans   |          |
|     | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |          |
|     | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |          |
|     | Yes  | ■ Other. Specify Notice Only  |          |
| 4.1 | Lvnv Funding Llc   | Last 4 digits of account number 1069  | \$519.00 |
| U ] | Nonpriority Creditor's Name  |   | •••      |
|     | Po Box 10497<br>Greenville, SC 29603   | When was the debt incurred? Opened 07/15  |          |
|     | Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply   |          |
|     | Who incurred the debt? Check one.  |   |          |
|     | ■ Debtor 1 only  | ☐ Contingent  |          |
|     | ☐ Debtor 2 only  | ☐ Unliquidated  |          |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |          |
|     | $\square$ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |          |
|     | ☐ Check if this claim is for a community                                     | Student loans   |          |
|     | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |          |
|     | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |          |
|     |  | Factoring Company Account Webbank   |          |
|     | ☐ Yes  | Other. Specify Fingerhut  |          |

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Debtor 1 Dale Lewis Case number (if know) 4.1 Midland Funding 6613 \$632.00 Last 4 digits of account number Nonpriority Creditor's Name 2365 Northside Dr Ste 30 When was the debt incurred? **Opened 05/15** San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Credit One** ☐ Yes Other. Specify Bank N.A. 4.1 4071 \$471.00 **Portfolio Recovery Ass** Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 06/16** Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Capital One** ☐ Yes Other. Specify Bank Usa N.A. 4.1 **Portfolio Recovery Ass** 9169 \$469.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 01/14** Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts Factoring Company Account Hsbc Bank ☐ Yes Other. Specify Nevada N.A.

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Case number (if know)

| Debtor             | 1 Dale Lev                        | vis                                       |   | Case r    | number (if k   | now)                      |                           |
|--------------------|-----------------------------------|---|---|-----------|----------------|---------------------------|---------------------------|
| 4.1                |                                   | ergy Marketing                            | Last 4 digits of account number   | 0317      | ,              |                           | \$305.00                  |
|                    | Nonpriority Cr                    | editor's Name                             |   | <b>0</b>  | 44/44          | Last Asthus               |                           |
|                    | 3344 Peac<br>Atlanta, G           | htree Rd Ne Ste<br>A 30326                | When was the debt incurred?   | 1/14/     |                | Last Active               |                           |
|                    | -                                 | t City State Zlp Code                     | As of the date you file, the claim  | is: Checl | k all that app | ly                        |                           |
|                    | Who incurred                      | I the debt? Check one.                    |   |           |                |                           |                           |
|                    | Debtor 1 o                        | nly                                       | ☐ Contingent  |           |                |                           |                           |
|                    | Debtor 2 o                        | nly                                       | ☐ Unliquidated  |           |                |                           |                           |
|                    | _                                 | nd Debtor 2 only                          | ☐ Disputed  |           |                |                           |                           |
|                    | _                                 | e of the debtors and another              | Type of NONPRIORITY unsecure  | d claim:  |                |                           |                           |
|                    | _                                 | his claim is for a community              | ☐ Student loans   |           |                |                           |                           |
|                    | debt                              | •   | ☐ Obligations arising out of a sepa   | ration ag | greement or    | divorce that you did not  |                           |
|                    | _                                 | ubject to offset?                         | report as priority claims   |           |                |                           |                           |
|                    | ■ No                              |   | Debts to pension or profit-sharing  |           | and other si   | milar debts               |                           |
|                    | ☐ Yes                             |   | Other. Specify Agriculture  | )         |                |                           |                           |
| 4.1                | Universal                         | Re  | Last 4 digits of account number   | 2723      | 3              |                           | \$180.00                  |
|                    | Nonpriority Cr                    |   | _   |           |                |                           |                           |
|                    | 11255 Sun                         |   | When was the debt incurred?   |           |                |                           |                           |
| -                  |                                   | ordova, CA 95742<br>t City State ZIp Code | As of the date you file, the claim  | is: Checl | k all that app | ılv                       |                           |
|                    |                                   | I the debt? Check one.                    | ,   |           |                | ,                         |                           |
|                    | Debtor 1 o                        | nly                                       | ☐ Contingent  |           |                |                           |                           |
|                    | Debtor 2 o                        | nlv                                       | ☐ Unliquidated  |           |                |                           |                           |
|                    | _                                 | nd Debtor 2 only                          | ☐ Disputed  |           |                |                           |                           |
|                    | _                                 | e of the debtors and another              | Type of NONPRIORITY unsecure  | d claim:  |                |                           |                           |
|                    |                                   | his claim is for a community              | ☐ Student loans   |           |                |                           |                           |
|                    | debt                              | -   | ☐ Obligations arising out of a sepa   | ration ag | greement or    | divorce that you did not  |                           |
|                    | Is the claim s                    | ubject to offset?                         | report as priority claims   |           |                |                           |                           |
|                    | ■ No                              |   | Debts to pension or profit-sharing  | •         |                | milar debts               |                           |
|                    | ☐ Yes                             |   | Other. Specify 01 Fry S Ele   | ectron    | ics Os         |                           |                           |
| Part 3:            | List Othe                         | rs to Be Notified About a Deb             | That You Already Listed   |           |                |                           |                           |
| is tryir<br>have n | ng to collect fr<br>nore than one | om you for a debt you owe to son          | out your bankruptcy, for a debt that y<br>neone else, list the original creditor in<br>you listed in Parts 1 or 2, list the addi<br>submit this page. | Parts 1   | or 2, then li  | ist the collection agency | / here. Similarly, if you |
| Part 4:            | Add the A                         | Amounts for Each Type of Uns              | secured Claim   |           |                |                           |                           |
|                    | the amounts o<br>f unsecured c    |   | ns. This information is for statistical r   | eporting  | purposes o     | only. 28 U.S.C. §159. Ad  | d the amounts for each    |
|                    |                                   |   |   |           |                | Total Claim               |                           |
| _                  | 6a                                | . Domestic support obligations            |   | 6a.       | \$             | 0.00                      | _                         |
|                    | Total<br>aims                     |   |   |           |                |                           |                           |
| from Pa            |                                   | . Taxes and certain other debts           | you owe the government  | 6b.       | \$             | 0.00                      | _                         |
|                    | 6c                                |   | jury while you were intoxicated   | 6c.       | \$             | 0.00                      | -                         |
|                    | 6d                                | . Other. Add all other priority unse      | cured claims. Write that amount here.   | 6d.       | \$             | 0.00                      | -                         |
|                    | 60                                | Total Briggity Add lines for three        | igh 6d  | 60        |                | 0.00                      |                           |
|                    | 6e                                | . Total Priority. Add lines 6a throu      | ign ou.   | 6e.       | \$             | 0.00                      | -                         |
|                    |                                   |   |   |           |                | Total Claim               |                           |
|                    | 6f.                               | Student loans                             |   | 6f.       | \$             | 0.00                      | _                         |
|                    | Total<br>aims                     |   |   |           |                |                           |                           |
| from Pa            |                                   | . Obligations arising out of a se         | paration agreement or divorce that  |           |                | 0.00                      |                           |

6g.

you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

0.00

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> 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i. 17,862.00 Total Nonpriority. Add lines 6f through 6i. 6j. 17,862.00

Official Form 106 E/F

| Fill in this infor  | mation to identify your  | case:             |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1            | Dale Lewis               |                   |             |  |
|                     | First Name               | Middle Name       | Last Name   |  |
| Debtor 2            |                          |                   |             |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |
|                     |                          |                   |             |  |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with<br>Name, Number | whom you have the<br>, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|-------------------|---|
| 2.1 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          |   |
| 2.2 |           |                              |  |                   | _                                       |
|     | Name      |                              |  |                   |   |
|     | Number    | Street                       |  |                   |   |
|     | City      |                              | State  | ZIP Code          | <u> </u>                                |
| 2.3 | City      |                              | State  | ZIF Code          |   |
| 2.3 |           |                              |  |                   | _                                       |
|     | Name      |                              |  |                   |   |
|     |           |                              |  |                   |   |
|     | Number    | Street                       |  |                   | _                                       |
|     | Number    | Olicci                       |  |                   |   |
|     | City      |                              | State  | ZIP Code          | _                                       |
| 2.4 | Oity      |                              | Cidio  | 211 0000          |   |
| 2.7 | Name      |                              |  |                   |   |
|     | ivame     |                              |  |                   |   |
|     |           |                              |  |                   |   |
|     | Number    | Street                       |  |                   |   |
|     |           |                              |  |                   |   |
|     | City      |                              | State  | ZIP Code          |   |
| 2.5 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | <del>_</del>                            |
|     |           |                              |  |                   |   |
|     | Number    | Street                       |  |                   | _                                       |
|     | MULLIDEL  | Ollect                       |  |                   |   |
|     | City      |                              | State  | ZIP Code          | _                                       |
|     | - ny      |                              | - Ciaio  |                   |   |

|                               |   | Docume   | ent Page 26 d             | DI 53                                   |   |
|-------------------------------|---|--|---------------------------|---|---|
| Fill in this                  | information to identify your  | case:  |                           |   |   |
| Debtor 1                      | Dale Lewis  |  |                           |   |   |
|                               | First Name  | Middle Name  | Last Name                 |   |   |
| Debtor 2<br>(Spouse if, filin | ng) First Name  | Middle Nome  | Last Name                 |   |   |
|                               | -   | Middle Name  |                           |   |   |
| United Stat                   | tes Bankruptcy Court for the:                                       | NORTHERN DISTRICT                                    | OF ILLINOIS               |   |   |
| Case numb                     | per   |  |                           |   |   |
| (if known)                    |   |  |                           |   | Check if this is an   |
|                               |   |  |                           |   | amended filing  |
| Official                      | Form 106H   |  |                           |   |   |
| Sched                         | ule H: Your Cod   | ebtors   |                           |   | 12/15   |
|                               | <u> </u>  |  |                           |   | .2.10   |
| ill it out, ar<br>our name    | nd number the entries in the<br>and case number (if known)          | boxes on the left. Attack<br>. Answer every question | n the Additional Page t   | o this page. On the top                 | eeded, copy the Additional Page, o of any Additional Pages, write   |
| 1. Do y                       | you have any codebtors? (If   | you are filing a joint case,                         | do not list either spouse | as a codebtor.                          |   |
| ■ No                          |   |  |                           |   |   |
| ☐ Yes                         |   |  |                           |   |   |
|                               | nin the last 8 years, have you<br>a, California, Idaho, Louisiana,  |  |                           |   |   |
| ■ No.                         | Go to line 3.   |  |                           |   |   |
| _                             | . Did your spouse, former spou                                      | use, or legal equivalent live                        | e with you at the time?   |   |   |
|                               |   |  | •                         |   |   |
| in line<br>Form 1             | 2 again as a codebtor only i  | f that person is a guaran                            | tor or cosigner. Make     | sure you have listed th                 | g with you. List the person shown<br>ne creditor on Schedule D (Official<br>Schedule E/F, or Schedule G to fill |
|                               | Column 1: Your codebtor<br>Name, Number, Street, City, State and Zi | P Code   |                           | Column 2: The cre<br>Check all schedule | editor to whom you owe the debt es that apply:  |
| 3.1                           |   |  |                           | ☐ Schedule D, lin                       | Δ   |
|                               | Name  |  |                           | ☐ Schedule E/F, I                       |   |
|                               |   |  |                           | ☐ Schedule G, lin                       | e   |
| 1                             | Number Street   |  |                           | _                                       |   |
| (                             | City  | State  | ZIP Code                  |   |   |
| 3.2                           |   |  |                           | ☐ Schedule D, lin                       |   |
|                               | Name  |  |                           | Schedule E/F, I                         |   |
|                               |   |  |                           | ☐ Schedule G, lin                       |   |
| 1                             | Number Street   |  |                           | _                                       |   |
|                               | City  | State  | ZIP Code                  |   |   |

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|                    | in this information to identify your control <b>Dale Lewis</b>   | ase:   |  |                      |                         |   |                           |                              |                 |
|--------------------|--|--|--|----------------------|-------------------------|---|---------------------------|------------------------------|-----------------|
| Del                | otor 2 ouse, if filing)  |  |  |                      | _                       |   |                           |                              |                 |
|                    | ited States Bankruptcy Court for the   | : NORTHERN DISTRIC                                   | CT OF ILLINOIS                                   |                      |                         |   |                           |                              |                 |
| Cas                | se number<br>nown)   |  | -  |                      |                         | heck if this is:  An amende  A supplement | ed filing<br>ent showing  |                              |                 |
| 0                  | fficial Form 106I  |  |  |                      |                         |   |                           | llowing date:                |                 |
|                    | chedule I: Your Inc  | ome  |  |                      |                         | MM / DD/ Y                                | YYY                       |                              | 12/15           |
| sup<br>spo<br>atta | as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not fili<br>r spouse is not filing w | ng jointly, and your s<br>ith you, do not includ | pouse i<br>le inforr | s living w<br>nation ab | vith you, incl<br>oout your spo           | ude inform<br>ouse. If mo | nation about<br>ore space is | your<br>needed, |
| 1.                 | Fill in your employment information.   |  | Debtor 1   |                      |                         | Debtor 2                                  | or non-fil                | ing spouse                   |                 |
|                    | If you have more than one job,   | Employment status                                    | ☐ Employed                                       |                      |                         | ☐ Employed                                |                           |                              |                 |
|                    | attach a separate page with information about additional employers.  |  | ■ Not employed                                   |                      |                         | ☐ Not employed                            |                           |                              |                 |
|                    | Include part-time, seasonal, or self-employed work.  | Occupation Employer's name                           |  |                      |                         |   |                           |                              |                 |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address                                   |  |                      |                         |   |                           |                              |                 |
|                    |  | How long employed t                                  | here?  |                      |                         |   |                           |                              |                 |
| Pai                | t 2: Give Details About Mor  | nthly Income   |  |                      |                         |   |                           |                              |                 |
|                    | mate monthly income as of the duse unless you are separated.   | ate you file this form. If                           | you have nothing to re                           | port for             | any line, v             | vrite \$0 in the                          | space. Inc                | lude your no                 | n-filing        |
| -                  | u or your non-filing spouse have mo<br>e space, attach a separate sheet to   |  | ombine the information                           | for all e            | mployers                | for that perso                            | on on the lir             | nes below. If                | you need        |
|                    |  |  |  |                      | For                     | Debtor 1                                  |                           | otor 2 or<br>ng spouse       |                 |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |  |  | 2.                   | \$                      | 0.00                                      | \$                        | N/A                          |                 |
| 3.                 | Estimate and list monthly overt  | ime pay.   |  | 3.                   | +\$                     | 0.00                                      | +\$                       | N/A                          |                 |
| 4.                 | Calculate gross Income. Add lin  | ne 2 + line 3.                                       |  | 4.                   | \$                      | 0.00                                      | \$                        | N/A                          |                 |

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| Deb | tor 1                         | Dale Lewis   |           | Ca   | se number (if kr | own)         |           |                               |                 |
|-----|-------------------------------|--|-----------|------|------------------|--------------|-----------|-------------------------------|-----------------|
|     |                               |  |           | F    | or Debtor 1      |              |           | Debtor 2 or<br>-filing spouse |                 |
|     | Cop                           | by line 4 here   | 4.        | \$   | C                | 0.00         | \$        | N/A                           | _               |
| 5.  | l ict                         | all payroll deductions:  |           |      |                  |              |           |                               | -               |
| Э.  |                               | • •  | Fo        | Φ.   |                  |              | ¢.        | N1/A                          |                 |
|     | 5a.<br>5b.                    | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans   | 5a<br>5b  |      |                  | 0.00         | \$        | N/A<br>N/A                    | -               |
|     | 5c.                           | Voluntary contributions for retirement plans   | 5c.       |      |                  | 0.00         | - \$<br>- | N/A                           | -               |
|     | 5d.                           | Required repayments of retirement fund loans   | 5d        |      |                  | 0.00         | \$        | N/A                           | -               |
|     | 5e.                           | Insurance  | 5e        |      |                  | 0.00         | \$        | N/A                           | -               |
|     | 5f.                           | Domestic support obligations   | 5f.       |      |                  | 0.00         | \$        | N/A                           | -               |
|     | 5g.                           | Union dues   | 5g        | . \$ |                  | .00          | \$        | N/A                           | -               |
|     | 5h.                           | Other deductions. Specify:   | 5h        |      |                  | .00          | + \$      | N/A                           | -               |
| 6.  | Add                           | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.        | \$   |                  | .00          | \$        | N/A                           | _               |
| 7.  | Cal                           | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.        | \$   | 0                | .00          | \$        | N/A                           |                 |
| 8.  | List<br>8a.                   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                |           |      |                  |              |           |                               |                 |
|     | ٠.                            | monthly net income.  | 8a        |      |                  | .00          | \$        | N/A                           | _               |
|     | 8b.                           | Interest and dividends   | 8b        | . \$ | 0                | .00          | \$        | N/A                           | -               |
|     | 8c.<br>8d.                    | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  | 8c.<br>8d |      |                  | ).00<br>).00 | \$        | N/A<br>N/A                    | -               |
|     | 8e.                           | Social Security  | 8e        |      |                  | 0.00         | \$        | N/A                           | -               |
|     | 8f.                           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:     | 8f.       | \$   | 0                | 0.00         | \$        | N/A                           | -               |
|     | 8g.                           | Pension or retirement income   | 8g        |      |                  | .00          | \$        | N/A                           | _               |
|     | 8h.                           | Other monthly income. Specify: Workers Compensation  | _ 8h      |      |                  |              |           | N/A                           | -               |
|     |                               | VA   | _         | \$   | 1,784            | .48          | \$        | N/A                           | =               |
| 9.  | Add                           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.        | \$_  | 4,084            | .48          | \$        | N/A                           | X .             |
| 10  | Cal                           | culate monthly income. Add line 7 + line 9.  | 10.       | \$   | 4,084.48         | . •          |           | N/A = \$                      | 4,084.48        |
| 10. |                               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10.       | Ψ    | 4,004.40         | Τ Ψ.         |           | <u> ΙΝ/Α</u> -   Ψ —          | 4,004.40        |
| 11. | State<br>Inclination<br>Other | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify: | depe      |      |                  |              |           | Schedule J.<br>11. +\$        | 0.00            |
| 12. |                               | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies  |           |      |                  |              |           | 12. \$                        | 4,084.48        |
|     |                               |  |           |      |                  |              |           | Combir<br>monthly             | ned<br>y income |
| 13. | =                             | you expect an increase or decrease within the year after you file this form No.  | ?         |      |                  |              |           |                               | ,o              |
|     |                               | Yes. Explain:  |           |      |                  |              |           |                               |                 |

Official Form 106I Schedule I: Your Income page 2

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| Fill in this informa  | ation to identify vo  | ur ca <u>se:</u>  |  |   |                             |                 |  |
|---|---|---|--|---|-----------------------------|-----------------|--|
| Debtor 1  | Dale Lewis  |   |  |   |                             | c if this is:   |  |
| Debtor 2<br>(Spouse, if filing)   |   |   |  |   |                             |                 | ving postpetition chapte<br>the following date:  |
| United States Bank  | ruptcy Court for the:   | NORTH   | ERN DISTRICT OF ILLIN  | OIS   | <u> </u>                    | MM / DD / YYYY  |  |
| Case number(If known)   |   |   |  |   |                             |                 |  |
| Official Fo   |   |   |  |   | •                           |                 |  |
|   | and accurate as<br>nore space is ne   | possible.<br>eded, atta   | If two married people ar   |   |                             |                 |  |
| Part 1: Descri<br>1. Is this a join   | ribe Your House nt case?  | hold  |  |   |                             |                 |  |
|   | es Debtor 2 live i  | -   |  | ofor Sanarata House   | ahold of Debte              | or 2            |  |
|   |   | _   | ar 1 01111 1000-2, <i>Expenses</i>   | Tor Separate Flouse   | eriola di Debit             | JI 2.           |  |
| Do not list D Debtor 2.   | •   | ■ No □ Yes.   | Fill out this information for each dependent   | Dependent's relating Debtor 1 or Debtor   |                             | Dependent's age | Does dependent live with you?  |
| Do not state dependents   |   |   |  |   |                             |                 | □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes  |
| expenses o  | penses include<br>of people other th<br>ad your depende   | nan 🗖   | No<br>Yes  |   |                             |                 | ⊔ Yes  |
| Estimate your ex  | a date after the b  | our bankru  | y Expenses<br>ptcy filing date unless y<br>v is filed. If this is a supp   |   |                             |                 |  |
|   | h assistance and  |   | government assistance i<br>luded it on <i>Schedule I:</i> )  |   |                             | Your exp        | enses  |
|   | or home owners  |   | ses for your residence. I  | nclude first mortgag  | e<br>4. \$                  |                 | 1,000.00   |
| If not include  | ded in line 4:  |   |  |   |                             |                 |  |
| 4b. Prope<br>4c. Home<br>4d. Home   | estate taxes<br>erty, homeowner's<br>e maintenance, re<br>eowner's associat   | pair, and u   | pkeep expenses<br>Iominium dues  |   | 4a. \$ 4b. \$ 4c. \$ 4d. \$ |                 | 0.00<br>0.00<br>75.00<br>0.00  |
| 1. Is this a join  No. Go to Yes. Doe  No. Go | nt case? o line 2. es Debtor 2 live i do 'es. Debtor 2 mus 'e dependents? Debtor 1 and e the names.  penses include of people other th d your dependent expenses as of you a date after the been assistance and office in line 4: estate taxes erty, homeowner's e maintenance, re eowner's associate | n a separa it file Officia No Yes.  nan nts?  ng Monthly bur bankruptcy non-cash ( d have inc hip expense e ground of s, or renter' pair, and u ion or cond | No Yes  y Expenses  pitcy filing date unless y is filed. If this is a supp government assistance i luded it on Schedule I: Y sees for your residence. I lot. | Dependent's relative Debtor 1 or Debtor 1 | orm as a supe J, check the  | Dependent's age | live with you?  No Yes No One The form and fill  enses  1,000.00  0.00 75.00 |

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| Debtor 1                 | Dale Lewis   | Case num     | ber (if known) |  |
|--------------------------|--|--------------|----------------|--|
| 6. <b>Utilitie</b>       | s:   |              |                |  |
| 6a.                      | Electricity, heat, natural gas   | 6a.          | \$             | 275.00   |
| 6b.                      | Nater, sewer, garbage collection   | 6b.          | \$             | 0.00   |
| 6c.                      | Telephone, cell phone, Internet, satellite, and cable services   | 6c.          | \$             | 350.00   |
| 6d.                      | Other. Specify:  | 6d.          | \$             | 0.00   |
| 7. Food a                | and housekeeping supplies  |              | \$             | 650.00   |
| 3. Childo                | are and children's education costs   | 8.           | \$             | 0.00   |
| . Clothi                 | ng, laundry, and dry cleaning  | 9.           | \$             | 100.00   |
| 0. Perso                 | nal care products and services   | 10.          | \$             | 200.00   |
| 1. Medic                 | al and dental expenses   | 11.          | \$             | 250.00   |
|                          | portation. Include gas, maintenance, bus or train fare.  |              |                |  |
|                          | include car payments.  | 12.          | \$             | 400.00   |
| <ol><li>Entert</li></ol> | ainment, clubs, recreation, newspapers, magazines, and books   | 13.          | \$             | 100.00   |
| 4. Charit                | able contributions and religious donations   | 14.          | \$             | 200.00   |
| 5. <b>Insura</b>         |  |              |                |  |
| Do not                   | include insurance deducted from your pay or included in lines 4 or 20.   |              |                |  |
|                          | Life insurance   | 15a.         |                | 0.00   |
| 15b.                     | Health insurance   | 15b.         | \$             | 0.00   |
| 15c.                     | √ehicle insurance  | 15c.         | \$             | 230.00   |
| 15d.                     | Other insurance. Specify:  | 15d.         | \$             | 0.00   |
|                          | Do not include taxes deducted from your pay or included in lines 4 or 20.  |              |                |  |
| Specif                   |  | 16.          | \$             | 0.00   |
|                          | ment or lease payments:  | 47           | •              |  |
|                          | Car payments for Vehicle 1   | 17a.         | ·              | 228.00   |
|                          | Car payments for Vehicle 2   | 17b.         |                | 0.00   |
|                          | Other. Specify:  | 17c.         |                | 0.00   |
|                          | Other. Specify:  | 17d.         | \$             | 0.00   |
| 3. Your p                | ayments of alimony, maintenance, and support that you did not report as  | 18.          | \$             | 0.00   |
|                          | ted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). payments you make to support others who do not live with you.  | 10.          | Ψ              | 0.00   |
| Specify                  | •  | 19.          | Ψ              | 0.00   |
|                          | real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>   |              | our Income     |  |
|                          | Mortgages on other property  | 20a.         |                | 0.00   |
|                          | Real estate taxes  | 20b.         |                | 0.00   |
|                          | Property, homeowner's, or renter's insurance   | 20c.         | ·              | 0.00   |
|                          | Maintenance, repair, and upkeep expenses   | 20d.         | ·              | 0.00   |
|                          | Homeowner's association or condominium dues  | 20a.<br>20e. | ·              |  |
|                          |  |              | ·              | 0.00   |
| . Other:                 | Specify:   | 21.          | +\$            | 0.00   |
| . Calcul                 | ate your monthly expenses  |              |                |  |
| 22a. A                   | dd lines 4 through 21.   |              | \$             | 4,058.00                                       |
| 22b. C                   | opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |              | \$             | <u>,                                      </u> |
| 22c. A                   | dd line 22a and 22b. The result is your monthly expenses.  |              | \$             | 4,058.00                                       |
|                          | ···· ···· ···· ··· · · · · ·   |              |                | 4,000.00                                       |
|                          | ate your monthly net income.   |              |                |  |
|                          | Copy line 12 (your combined monthly income) from Schedule I.   | 23a.         |                | 4,084.48                                       |
| 23b.                     | Copy your monthly expenses from line 22c above.  | 23b.         | -\$            | 4,058.00                                       |
| 220                      | Publicant value manthly avanaga from value manthly income  |              |                |  |
|                          | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .  | 23c.         | \$             | 26.48  |
| For exa                  | Lexpect an increase or decrease in your expenses within the year after yomple, do you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage? |              |                | se or decrease because of a                    |
| ■ No.                    |  |              |                |  |
| ☐ Yes                    |  |              |                |  |

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| Fill in th | nis information to i                        | dentify your  | case:                   |                           |   |   |
|------------|---|---------------|-------------------------|---------------------------|---|---|
| Debtor '   |   | _             |                         |                           |   |   |
| Dobioi     | First Nam                                   | -             | Middle Name             | Last Name                 |   |   |
| Debtor 2   | 2   |               |                         |                           |   |   |
| (Spouse if | , filing) First Nam                         | )             | Middle Name             | Last Name                 | _   |   |
| United S   | States Bankruptcy C                         | ourt for the: | NORTHERN DISTRIC        | CT OF ILLINOIS            |   |   |
| Case nu    | ımber                                       |               |                         |                           |   |   |
| (if known) |   |               |                         |                           |   | ☐ Check if this is an   |
|            |   |               |                         |                           |   | amended filing  |
| If two m   | arried people are fi                        | ling together | , both are equally resp |                           | orrect information.<br>es. Making a false sta | tement, concealing property, or 100, or imprisonment for up to 20 |
|            | r both. 18 U.S.C. §§                        |               |                         | . ,                       | •   | , , ,   |
|            | Sign Below                                  |               |                         |                           |   |   |
| Die        | d you pay or agree                          | to pay some   | one who is NOT an att   | orney to help you fill ou | t bankruptcy forms?                           |   |
|            | No  |               |                         |                           |   |   |
|            | Yes. Name of pe                             | rson          |                         |                           |   | nkruptcy Petition Preparer's Notice,                              |
|            |   |               |                         |                           | Declaratio                                    | n, and Signature (Official Form 119)                              |
|            | der penalty of perju<br>t they are true and |               | that I have read the su | mmary and schedules fi    | led with this declarat                        | ion and   |
| Х          | /s/ Dale Lewis                              |               |                         | X                         |   |   |
|            | Dale Lewis                                  |               |                         | Signature                 | of Debtor 2                                   |   |
|            | Signature of Debto                          | · 1           |                         |                           |   |   |
|            | Date <b>Decembe</b>                         |               |                         |                           |   |   |

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| Debtor 1  Dale Lewis First Name  Debtor 2 (Spouse if, filing)  United States Bankruptcy Court for the:  NORTHERN DISTRICT OF IL  | Last Name  Last Name  LINOIS                       |  |   |
|--|--|--|---|
| First Name Middle Name  Debtor 2 (Spouse if, filing) First Name Middle Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF IL   | Last Name  |  |   |
| Debtor 2 (Spouse if, filing)  First Name  Middle Name  United States Bankruptcy Court for the:  NORTHERN DISTRICT OF IL  | Last Name  |  |   |
| (Spouse if, filing) First Name Middle Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF IL  |  |  |   |
|  | LINOIS   |  |   |
| Coop number  |  |  |   |
| Case number(if known)  |  | -  | heck if this is an<br>mended filing                   |
| Official Form 107 Statement of Financial Affairs for Individua Be as complete and accurate as possible. If two married people are fil information. If more space is needed, attach a separate sheet to this  | ling together, both are                            | equally responsible for supp               |   |
| number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Live   | ed Before  |  |   |
| 1. What is your current marital status?  |  |  |   |
| ■ Married □ Not married  |  |  |   |
| 2. During the last 3 years, have you lived anywhere other than wher  | re you live now?                                   |  |   |
| ■ No   |  |  |   |
| $\square$ Yes. List all of the places you lived in the last 3 years. Do not inc  | clude where you live now                           |  |   |
| Debtor 1 Prior Address:  Dates Debtor 1 lived there  | Debtor 2 Prior Ad                                  | dress:                                     | Dates Debtor 2<br>lived there                         |
| 3. Within the last 8 years, did you ever live with a spouse or legal ed states and territories include Arizona, California, Idaho, Louisiana, Nevada.  |  |  |   |
| <ul><li>■ No</li><li>□ Yes. Make sure you fill out Schedule H: Your Codebtors (Official</li></ul>  | l Form 106H).                                      |  |   |
| Part 2 Explain the Sources of Your Income  |  |  |   |
| <ul> <li>4. Did you have any income from employment or from operating a beginning in the total amount of income you received from all jobs and all but If you are filing a joint case and you have income that you receive together than the property of the p</li></ul> | sinesses, including part-                          | time activities.                           | dar years?  |
| Debtor 1   |  | Debtor 2                                   |   |
| Check all that apply. (b   | ross income<br>before deductions and<br>xclusions) | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |

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| 5. |                              |                     |                              | e during this year or the<br>ner that income is taxable.   |               |  | limony: child supr               | oort: Social Se     | curity unemployment                             |
|----|------------------------------|---------------------|------------------------------|--|---------------|--|----------------------------------|---------------------|---|
|    | and other                    | public bene         | fit payments;                | pensions; rental income; is and you have income the        | nterest; divi | dends; money collec                                    | ted from lawsuits;               | royalties; and      |   |
|    | List each s                  | source and t        | the gross inco               | ome from each source sep                                   | arately. Do   | not include income t                                   | hat you listed in lir            | ne 4.               |   |
|    | □ No                         |                     |                              |  |               |  |                                  |                     |   |
|    | Yes.                         | Fill in the de      | etails.                      |  |               |  |                                  |                     |   |
|    |                              |                     |                              | Debtor 1   |               |  | Debtor 2                         |                     |   |
|    |                              |                     |                              | Sources of income Describe below.                          | each<br>(befo | s income from<br>source<br>re deductions and<br>sions) | Sources of inc<br>Describe below |                     | Gross income (before deductions and exclusions) |
|    | om January<br>e date you f   |                     | nt year until<br>nkruptcy:   | VA Disability  |               | \$21,408.00  |                                  |                     |   |
|    |                              |                     |                              | Workers<br>Compensation                                    |               | \$27,600.00  |                                  |                     |   |
|    | or last calen<br>anuary 1 to |                     | 31, 2015 )                   | VA Disability  |               | \$21,408.00  |                                  |                     |   |
|    |                              |                     |                              | Workers<br>Compensation                                    |               | \$27,600.00  |                                  |                     |   |
|    | or the calend<br>anuary 1 to |                     |                              | VA Disability  |               | \$21,408.00  |                                  |                     |   |
| Pa | art 3: List                  | Certain Pa          | vments You                   | Made Before You Filed                                      | for Bankrui   | ntcv   |                                  |                     |   |
| 6. |                              | Debtor 1's          | or Debtor 2<br>ebtor 1 nor D | 's debts primarily consu<br>Debtor 2 has primarily co      | mer debts?    | bts. Consumer debt                                     | s are defined in 11              | U.S.C. § 101        | (8) as "incurred by an                          |
|    |                              | ·                   |                              | ore you filed for bankruptcy                               |               |  | l of \$6 425* or mo              | uro?                |   |
|    |                              | □ No.               | Go to line 7                 |  | y, ala you pe | ly arry creditor a tota                                | 101 \$0,425 01 1110              | 10:                 |   |
|    |                              | □ Yes               | paid that cr                 | each creditor to whom you editor. Do not include pay       | nents for do  | omestic support oblig                                  |                                  |                     |   |
|    |                              | * Subject           |                              | payments to an attorney f<br>t on 4/01/19 and every 3 y    |               |  | or after the date of             | of adjustment.      |   |
|    | Yes.                         |                     |                              | or both have primarily co                                  |               |  | l of \$600 or more?              | ?                   |   |
|    |                              | □ <sub>No.</sub>    | Go to line 7                 | ·.   |               |  |                                  |                     |   |
|    |                              | ■ Yes               | List below e                 | ·<br>each creditor to whom you<br>ments for domestic suppo |               |  |                                  |                     |   |
|    |                              |                     | attorney for                 | this bankruptcy case.                                      |               |  |                                  |                     |   |
|    | Creditor'                    | s Name and          | d Address                    | Dates of pay   | /ment         | Total amount paid                                      | Amount you still owe             | Was this pa         | ayment for                                      |
|    | Wfds/w                       |                     |                              |  |               | \$684.00   | \$7,906.00                       | ☐ Mortgag           | е   |
|    | Po Box<br>Winterv            | 1697<br>ille, NC 28 | 3590                         |  |               |  |                                  | ■ Car □ Credit C    |   |
|    |                              |                     |                              |  |               |  |                                  | ☐ Loan Re☐ Supplier | payment<br>s or vendors                         |

□ Other

Case 16-40837 Doc 1 Filed 12/30/16 Entered 12/30/16 15:55:30 Desc Main Page 34 of 53 Document **Dale Lewis** Case number (if known) Debtor 1 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment paid still owe Include creditor's name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. □ No

| Yes. Fill in the details.  Case title  Case number | Nature of the case | Court or agency  | Status of the case                |
|--|--------------------|--|-----------------------------------|
| Americash V Lewis<br>10M1-201903                   | Collections        | Circuit Court Clerk (Cook)<br>50 W Washington St<br>Room 1001<br>Chicago, IL 60602 | ☐ Pending ☐ On appeal ☐ Concluded |

Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

| No. | Go to | line | 11. |
|-----|-------|------|-----|
|     |       |      |     |

Yes. Fill in the information below.

| Creditor Name and Address | Describe the Property | Date | Value of the |
|---------------------------|-----------------------|------|--------------|
|                           |                       |      | property     |
|                           | Explain what happened |      |              |

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Yes. Fill in the details.

**Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Nο

Yes

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Case number (if known) Document Debtor 1 Dale Lewis

| Pai   | t 5: List Certain Gifts and Contributions   | 3  |   |                                   |                   |
|---|---|--|---|-----------------------------------|-------------------|
| 13.   | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No  □ Yes. Fill in the details for each gift.   |  |   |                                   |                   |
|   | Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:   |  | Describe the gifts                                | Dates you gave the gifts          | Value             |
|   |   |  |   |                                   |                   |
| Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) |   | Describe what you contributed  | Dates you contributed                             | Value                             |                   |
| Church  |   | \$200/Month  | last 24<br>months                                 | \$4,800.00                        |                   |
| how the loss occurred   | Include   | ibe any insurance coverage for the loss e the amount that insurance has paid. List pending | Date of your loss                                 | Value of property lost            |                   |
| Pa  | t 7: List Certain Payments or Transfers   |  | nce claims on line 33 of Schedule A/B: Property.  |                                   |                   |
| 16.   | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No  Yes. Fill in the details. |  |   |                                   |                   |
|   | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Yo  | ou   | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|   | Gleason & Gleason<br>77 W Washington, Ste 1218<br>Chicago, IL 60602<br>http://chilawyers.com  |  | Filing Fee \$335<br>Attorney Fees: \$90           | 2016                              | \$425.00          |
|   | Summit Financial Education Inc<br>4800 E Flower St<br>Tucson, AZ 85712<br>http://summitfe.org   |  |   | 2016                              | \$9.95            |

Case 16-40837 Doc 1 Filed 12/30/16 Entered 12/30/16 15:55:30 Desc Main Page 36 of 53 Document Case number (if known) Debtor 1 Dale Lewis 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of payment Address transferred or transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. п No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number Address (Number, Street, City, State and ZIP instrument closed, sold, before closing or Code) moved, or transfer transferred **PNC** XXXX-\$0.00 ☐ Checking **Bankruptcy** □ Savings 6750 Miller Road ☐ Money Market Brecksville, OH 44141 □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

Nο

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

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| 22. | Have you stored property in a storage unit or p   | lace other than your home within 1  | year before you filed for bankruptcy   | ?                     |
|-----|---|---|--|-----------------------|
|     | No  |   |  |                       |
|     | Yes. Fill in the details.   |   |  |                       |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or had access<br>to it?<br>Address (Number, Street, City,<br>State and ZIP Code) | Describe the contents                  | Do you still have it? |
| Par | 19: Identify Property You Hold or Control for   | Someone Else  |  |                       |
| 23. | Do you hold or control any property that some for someone.  | one else owns? Include any proper   | rty you borrowed from, are storing for | r, or hold in trust   |
|     | ■ No □ Yes. Fill in the details.  |   |  |                       |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)                       | Describe the property                  | Value                 |
| Par | t 10: Give Details About Environmental Inform   | •   |  |                       |
| For | the purpose of Part 10, the following definitions   | apply:  |  |                       |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | ir, land, soil, surface water, ground   | - ·                                    |                       |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposal  | -   | law, whether you now own, operate,     | or utilize it or used |
|     | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or   |   | s waste, hazardous substance, toxic s  | substance,            |
| Rep | ort all notices, releases, and proceedings that y   | ou know about, regardless of wher   | n they occurred.                       |                       |
| 24. | Has any governmental unit notified you that yo  | u may be liable or potentially liable   | under or in violation of an environme  | ental law?            |
|     | ■ No □ Yes. Fill in the details.  |   |  |                       |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code)                     | Environmental law, if you know it      | Date of notice        |
| 25. | Have you notified any governmental unit of any  | release of hazardous material?  |  |                       |
|     | ■ No □ Yes. Fill in the details.  |   |  |                       |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code)                     | Environmental law, if you know it      | Date of notice        |
| 26. | Have you been a party in any judicial or admini   | strative proceeding under any envi  | ironmental law? Include settlements a  | and orders.           |
|     | ■ No □ Yes. Fill in the details.  |   |  |                       |
|     | Case Title Case Number  | Court or agency<br>Name<br>Address (Number, Street, City,<br>State and ZIP Code)              | Nature of the case                     | Status of the case    |
| Par | Give Details About Your Business or Cor   | nnections to Any Business   |  |                       |
| 27. | Within 4 years before you filed for bankruptcy,   | did you own a business or have ar   | ny of the following connections to any | y business?           |
|     | ☐ A sole proprietor or self-employed in a   | •   | •                                      |                       |
|     | ☐ A member of a limited liability company   | (LLC) or limited liability partnersh  | iip (LLP)                              |                       |

Case 16-40837 Doc 1 Filed 12/30/16 Entered 12/30/16 15:55:30 Desc Main Page 38 of 53 Document Case number (if known) Dale Lewis Debtor 1 ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed DJ DJ EIN: From-To Just started 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Dale Lewis Signature of Debtor 2 **Dale Lewis** Signature of Debtor 1 Date Date December 30, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this inform                  | nation to identify your                            | case:                 |  |   |
|--------------------------------------|--|-----------------------|--|---|
| Debtor 1                             | Dale Lewis   |                       |  |   |
|                                      | First Name   | Middle Name           | Last Name  | _   |
| Debtor 2<br>(Spouse if, filing)      | First Name   | Middle Name           | Last Name  | _   |
|                                      | nkruptcy Court for the:                            | NORTHERN DIST         | RICT OF ILLINOIS   |   |
| Office States Bar                    | inapley Court for the.                             |                       | THE TOTAL PROPERTY OF THE PROP | _   |
| Case number                          |  |                       |  | ☐ Check if this is an                                       |
| ,                                    |  |                       |  | amended filing  |
| If you are an indiv                  | nt of Intentio                                     | oter 7, you must fill | iduals Filing Under Cha  | apter 7 12/15   |
| creditors have                       | claims secured by yo                               | ur property, or       |  |   |
| You must file this                   | ver is earlier, unless th                          | ithin 30 days after   | ot expired.<br>you file your bankruptcy petition or by the d<br>time for cause. You must also send copies  |   |
|                                      | ople are filing together date the form.            | in a joint case, bot  | h are equally responsible for supplying cor  | rect information. Both debtors must                         |
|                                      | nd accurate as possib<br>our name and case nur     |                       | needed, attach a separate sheet to this form   | m. On the top of any additional pages,                      |
| Part 1: List Yo                      | our Creditors Who Have                             | Secured Claims        |  |   |
| 1. For any credito                   | ors that you listed in Pa                          | rt 1 of Schedule D:   | Creditors Who Have Claims Secured by Pr  | operty (Official Form 106D), fill in the                    |
| information bel                      | low.   |                       | •  | · · · ·   |
| Identify the cre                     | ditor and the property th                          | nat is collateral     | What do you intend to do with the proper secures a debt?   | ty that Did you claim the property as exempt on Schedule C? |
| Creditor's <b>W</b>                  | fds/wds  |                       | ☐ Surrender the property.  | □ No  |
| name:                                |  |                       | Retain the property and redeem it.   | ■ Yes   |
| Description of property              | 2005 Lexus RX 330 miles                            | 170000                | Retain the property and enter into a Reaffirmation Agreement.  | ■ Yes   |
| securing debt:                       | NADA   |                       | ☐ Retain the property and [explain]:   |   |
| Dort 2: List Vo                      | ur Unexpired Persona                               | Droporty Logge        |  |   |
| For any unexpired in the information | d personal property le<br>n below. Do not list rea | ase that you listed i | n Schedule G: Executory Contracts and Un<br>expired leases are leases that are still in effo<br>he trustee does not assume it. 11 U.S.C. § 3   | ect; the lease period has not yet ended.                    |
| Describe your ur                     | nexpired personal prop                             | erty leases           |  | Will the lease be assumed?                                  |
| Lessor's name:                       |  |                       |  | □ No  |
| Description of lease Property:       | sed  |                       |  |   |
| r roporty.                           |  |                       |  | ☐ Yes   |
| Lessor's name:                       |  |                       |  | □ No  |
| Description of lease<br>Property:    | sed  |                       |  | ☐ Yes   |
| Lessor's name:                       |  |                       |  | □ No  |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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| Debtor 1 Dale Lewis                     | Case number (if known) |
|---|------------------------|
| Description of leased Property:         | ☐ Yes                  |
| Lessor's name:<br>Description of leased | □ No                   |
| Property:                               | ☐ Yes                  |
| Lessor's name: Description of leased    | □ No                   |
| Property:                               | ☐ Yes                  |
| Lessor's name:<br>Description of leased | □ No                   |
| Property:                               | ☐ Yes                  |
| Lessor's name:<br>Description of leased | □ No                   |
| Property:                               | ☐ Yes                  |

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| Debtor 1 Dale Lewis |         | ale Lewis   | Case number (if known)   |
|---------------------|---------|---|--|
|                     |         |   |  |
|                     |         |   |  |
|                     |         |   |  |
|                     |         |   |  |
|                     |         |   |  |
| Part 3:             | Sig     | ın Below  |  |
| oropert             | ty that | y of perjury, I declare that I have indicat<br>is subject to an unexpired lease.<br>• Lewis | ed my intention about any property of my estate that secures a debt and any personal |
|                     | ale L   |   | Signature of Debtor 2  |
| _                   |         |   | Signature of Debtor 2  |
| 5                   | ignatu  | re of Debtor 1  |  |
| D                   | ate     | December 30, 2016   | Date   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
| · | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

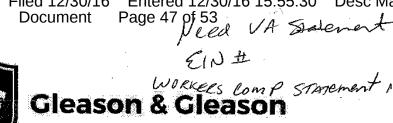
In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-40837 Doc 1 Filed 12/30/16 Entered 12/30/16 15:55:30 Desc Main Document Page 46 of 53

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

| In   | re <b>I</b>          | Dale Lewis                           |         |   |                     |                                      | Case No              | ).                  |                      |
|------|----------------------|--------------------------------------|---------|---|---------------------|--------------------------------------|----------------------|---------------------|----------------------|
|      | _                    |                                      |         |   |                     | Debtor(s)                            | Chapter              | 7                   |                      |
|      |                      | DIS                                  | CLO     | OSURE OF CO   | MPENSATI            | ON OF ATTO                           | RNEY FOR I           | DEBTOR(S)           |                      |
| 1.   | comp                 | pensation paid to                    | me w    | 29(a) and Fed. Bankr. I<br>vithin one year before to<br>the debtor(s) in contemp            | the filing of the p | etition in bankruptcy                | , or agreed to be pa | id to me, for servi |                      |
|      |                      | For legal service                    | s, I h  | ave agreed to accept  |                     |                                      | \$                   | 940.00              | _                    |
|      |                      | Prior to the filing                  | g of th | his statement I have red  |                     |                                      |                      | 90.00               | _                    |
|      |                      |                                      |         |   |                     |                                      |                      | 850.00              | -                    |
| 2.   | \$ <u>         3</u> | 335.00 of the                        | filing  | fee has been paid.  |                     |                                      |                      |                     |                      |
| 3.   | The s                | source of the con                    | npens   | sation paid to me was:  |                     |                                      |                      |                     |                      |
|      |                      | Debtor                               |         | Other (specify):  |                     |                                      |                      |                     |                      |
| 4.   | The s                | source of compe                      | nsatio  | on to be paid to me is:   |                     |                                      |                      |                     |                      |
|      |                      | ■ Debtor                             |         | Other (specify):  |                     |                                      |                      |                     |                      |
| 5.   | ■ I                  | have not agreed                      | to sh   | are the above-disclose  | d compensation v    | vith any other persor                | n unless they are me | mbers and associa   | ates of my law firm. |
|      |                      |                                      |         | the above-disclosed co<br>, together with a list of   |                     |                                      |                      |                     | f my law firm. A     |
| 5.   | In re                | turn for the abov                    | e-dis   | closed fee, I have agree  | ed to render legal  | service for all aspec                | cts of the bankruptc | y case, including:  |                      |
|      | b. P.                | reparation and fi                    | ling o  | s financial situation, an<br>of any petition, schedul<br>lebtor at the meeting of<br>seded] | les, statement of a | affairs and plan whic                | h may be required;   | -                   | a bankruptcy;        |
| 7.   | By ag                | greement with th                     | e deb   | otor(s), the above-discle   | osed fee does not   | include the following                | g service:           |                     |                      |
|      |                      |                                      |         |   | CERT                | IFICATION                            |                      |                     |                      |
| this |                      | tify that the foregraptcy proceeding |         | is a complete statemen  | nt of any agreeme   | ent or arrangement fo                | or payment to me fo  | r representation of | f the debtor(s) in   |
|      | Dece                 | mber 30, 2016                        |         |   |                     | /s/ Julie Gleasor                    |                      |                     |                      |
|      | Date                 |                                      |         |   |                     | Julie Gleason 62 Signature of Attorn |                      |                     |                      |
|      |                      |                                      |         |   |                     | Gleason & Gleas                      | •                    |                     |                      |
|      |                      |                                      |         |   |                     | 77 W Washingto                       |                      |                     |                      |
|      |                      |                                      |         |   |                     | Chicago, IL 6060<br>(312) 578-9530   |                      | 24                  |                      |
|      |                      |                                      |         |   |                     | troy@chicagobk                       |                      | · <b>-</b> ·        |                      |
|      |                      |                                      |         |   |                     | Name of law firm                     |                      |                     |                      |





#### Chapter 7 Information and Advice

Attorney fees \$940 + Court costs \$335 = \$1275 total costs Payment Plant 3 payments of \$425. If all fees are not paid prior to the filing of your case, you will be asked to sign a post-petition fee agreement for services rendered after the filing of your case.

Fees Cover: Intake appointment with attorney, petition preparation, representation at your first meeting of creditors, answering creditor calls and requests.

FEES DO NOT COVER: Credit counseling - there are 2 MANDATORY CLASSES. Additional litigation for adversaries, redemptions, defense of motions brought on behalf of a creditor or a trustee, or conversion of a chapter 7 to a chapter 13. You will be charged \$30 to add any creditors after the case is filed. You will be charged \$100 for us to attend a second meeting of creditors if you miss your first meeting. If your case is closed for failure to take the second class, the court will require you to pay \$260 to reopen the case. Initial here: I understand it is the policy of Gleason and Gleason that I am required to take my second class between case filing and my first 341 meeting of creditors. I understand that if my case closes without discharge and my certificate is dated after the first 341 meeting of creditors it is my responsibility to pay \$260 to reopen it.

Typical dischargeable debts: credit cards, medical bills, utilities, unsecured judgments, repossessions, personal loans, payday

Non dischargeable debts: Alimony, child support, debts owed under a divorce decree, student loans, traffic tickets, parking tickets, fines, criminal restitution, debt for personal injury or death related to a DUI, overpayment of government benefits, taxes. Co-signors are still responsible for debts. Credit card charges over \$500 in the last 90 days and cash advances over \$750 in the last 70 days may not be discharged.

Secured Loans Surrendering: (House|Car|Furniture|Jewelry) If you are surrendering a car or a house you are still responsible for tickets, code violations, HOA Fees etc until ownership\title is transferred - usually through a sale, like an auction of the car or house. Title is not transferred through the bankruptcy process. You will be responsible for utilities if not disconnected. Loans through municipal credit unions may be secured by pensions. Credit union loans may be cross collateralized with other credit union

Secured Loans Keeping: Initial here: \_I understand I must continue to make regular payments on all secured loans I am keeping. I may have to mail in payments as auto debit and check by phone may be disabled until a debt is reaffirmed. I understand I am required to maintain insurance. I understand that if I am keeping a property I must pay all mortgages including but not limited to 2nd mortgages and home equity lines of credit.

Payday Loans | Autodebits | Post dated checks: You must stop them with your bank. It may require closing the bank account. Utilities: If you bankrupt your utilities they are allowed to charge a deposit for future service and you must pay for any service used after your filing date forward. If you bankrupt a phone or cellular service they may discontinue service.

.Credit reporting: We pull credit reports from Transunion and Experian. We cannot guarantee the accuracy or completeness of the reports. Some creditors do not report to credit bureaus. It is your responsibility to review the report and inform us of any missing bilis.

Gleason and Gleason does not perform and this contract does not include any services relating to credit repair or correcting inaccurate credit reports. Credit bureaus may or may not report information regarding payments on cars or real estate you are keeping.

Clients agree that they have received the following documents: copy of this retainer agreement, list of required items to file bankruptcy, debtor's duties as required under sec. 521, notice required by sec 527(a)(2), notice required by sec 527(b). Checks may be deposited electronically. Client agrees to pay reasonable attorney fees if collections become necessary.

**Refund Policy:** If Client wants to terminate Gleason and Gleason, Client must notify Gleason and Gleason in writing. Gleason and Gleason will then perform an accounting of time and services performed and issue a refund check (if applicable) within a reasonable time. For the purpose of determining the refund due, Gleason and Gleason's current hourly rate is \$300 an bour for attorney time.

|              |           |      | order of the died of the state | or attorney time. |
|--------------|-----------|------|---|-------------------|
| Client       | YU        | alde | Attorney  |                   |
|              | (         |      |   |                   |
| Joint Client | i <u></u> |      |   | •                 |

# First Bankruptcy Course

### Choose how to take your pre-filing course



### Take the course online

Step 1: Go to myhorizontoday.com/firstcourse

Step 2: Enter your Access Code:

Step 3: Complete your registration by following the onscreen instructions



### Take the course by phone

Step 1: Call 1.877.213.6519

**041**2640 Step 2: Enter your Access Code:

Step 3: Complete your registration by following the telephonic instructions

### Available course providers

| Pre-filing Course Provider                  | Course<br>Price | Course<br>Availability | Counselor<br>Online                                    | Counselor<br>Phone                                     |
|---|-----------------|------------------------|--|--|
| Debt Education and Certification Foundation | \$24            | 24/7                   | 24/7   | 24/7   |
| Cricket Credit Counseling                   | \$24            | 24/7                   | M-F: 9am - 9pm EST                                     | M-F: 9am - 9pm EST                                     |
| DebtHelper                                  | \$24            | 24/7                   | M-Th: 9am - 9pm<br>F: 9am - 7pm<br>Sat: 10am - 5pm EST | M-Th; 9am - 9pm<br>F; 9am - 7pm<br>Sat: 10am - 5pm EST |
| Urgent Credit Counseling                    | \$20            | 2417                   | M-F: 9am - 9pm EST                                     | M-F: 9am - 9pm EST                                     |

All online and telephonic courses are available in English and Spanish.

Questions? Contact myHorizon support M-F 8 - 8pm ET . Toll-free 888.410.6988. Email: customercarg@myhorizontoday.com

royiders listed above are approved to issue certificates exidencing completion of debtor education in compliance with the Banknuncy Code. Approval do-inderse of assure the quality of the Provider's services. To see a full list of US Trustee approved accorders visit the US Trustee office website.

# Second Bankruptcy Course

### Choose how to take your post-filing course



Take the course online

Step 1: Go to myhorizontoday.com/secondcourse

Step 2: Enter your Access Code: 0412640

Step 3: Complete your registration by following the onscreen instructions



Take the course by phone

Step 1: Call 1.877.213.6519

Step 2: Enter your Access Code: 0412640

Step 3: Complete your registration by following the telephonic instructions

### Available course providers

| Post-filing Course Provider                 | Course<br>Price | Course<br>Availability | Counselor<br>Online | Counselor<br>Phone |
|---|-----------------|------------------------|---------------------|--------------------|
| Debt Education and Certification Foundation | 524             | 24/7                   | 24/7                | 24/7               |
| Second Bankruptcy Course                    | \$15            | 24/7                   | M-F 8am-8pm ET*     | M-F 8am-8pm ET*    |

All online and telephonic courses are available in English and Spanish.

Questions? Contact myHorzon support MsF-8 - 8pm-ET. Toll-free: 888.410.6988. Emgil: customercare@myhorzontoday.com

All Provisers listed above are approved to assist septificates evidencing completion of debter edugation in compliance with the Bankruptcy Gode. Approvalete

All Providers listed above are approved to issue conflicates evidencing completion of debtor edigation in compliance with the Bankruptcy Code. Approvaling not endorse or assure the quality of the Providers services. To see a full list of US Trustee approved providers visit the US Trustee office Website.

www.justice.gov/ust/credit-counseling-debtor-education-information.

<sup>\*</sup>A live SBC Counselor session is only required if the automated quiz is failed twice.



### **Chapter 7 Bankruptcy Retainer Agreement**

THE UNDERSIGNED CLIENT(S) EMPLOYS AND RETAINS GLEASON AND GLEASON, HEREINAFTER, ATTORNEY TO REPRESENT CLIENT(S) IN FILING A VOLUNTARY CHAPTER 7 BANKRUPTCY PETITION

THE PRE-PETITION SERVICES ATTORNEY WILL PROVIDE ARE CONSULTATION AND ADVICE, CONTACT AND COMMUNICATION WITH CREDITORS, PREPARATION OF THE BANKRUPTCY PETITION, SCHEDULES, STATEMENT OF FINANCIAL AFFAIRS, STATEMENT OF SOCIAL SECURITY NUMBER, MEANS TEST. CLIENT UNDERSTANDS THAT HE/SHE/THEY ARE SOLEY RESPONSIBLE FOR COMPLETING PRE-FILING CREDIT COUNSELING AND MUST OBTAIN A CERTIFICATE WHICH MUST BE FILED WITH THE COURT AT THE TIME OF FILING HIS/HER/THEIR PETITION. CLIENT IS RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH SAID COUNSELING.

| TO O   |
|--|
| THE EARNED FEE FOR THE PREPETITION SERVICE IS \$_90  |
| FILING FEE OF \$_335.00  |
| TOTAL OF PREPETITION SERVICE AND FILING FEE (PAYABLE TO GLEASON AND GLEASON): \$   |
| RETAINED WITH (CASH   CHECK  DEBIT   MONEY ORDER) \$_350   |
| BALANCE DUE FOR PRE-PETITION ATTORNEY FEES AND FILING FEE \$   |
| AFTER THE BANKRUPTCY CASE IS FILED I UNDERSTAND THAT I WILL BE PRESENTED WITH A SECOND RETAINER AGREEMENT TO PAY GLEASON AND GLEASON ATTORNEY FEES OF \$FOR POST FILING LEGAL SERVICES AND HAVE BEEN GIVEN A COPY OF THE PROPOSED AGREEMENT.   |
| CLIENT UNDERSTANDS THAT ONCE THE BANKRUPTCY CASE IS FILED THEY WILL NOT BE LEGALLY OBLIGATED FOR ANY OTHER FEES UNLESS AND UNTIL THEY ENTER INTO A SECOND RETAINER AGREEMENT PROMISING TO PAY FEES FOR THE REMAINDER OF MY REPRESENTION IN THIS CASE. CLIENT UNDERSTANDS THAT THEY ARE NOT OBLIGATED TO ENTER INTO AND MAY REFUSE TO SIGN THE SECOND RETAINER AGREEMENT. HOWEVER, GLEASON AND GLEASON RESERVES HE RIGHT TO WITHDRAW FROM REPRESENTATION IN THE EVENT THAT I DO NOT SIGN A SECOND RETAINER WITHIN 10 DAYS OF THE FILING OF MY CASE. CLIENT MAY SEEK OTHER LEGAL COUNSEL IF THEY DO NOT WISH TO BE REPRESENTED BY GLEASON AND GLEASON. |
| I UNDERSTAND THAT FEES PAID OR TO BE PAID ARE A FLAT FEE WHICH SHALL IMMEDIATELY BECOME PROPERTY OF GLEASON AND GLEASON IN AN EXCHANGE FOR A COMMITMENT BY GLEASON AND GLEASON TO PROVIDE LEGAL SERVICES. FUNDS WILL BE DEPOSITED INTO THE MAIN BANK ACCOUNT AND USED FOR GENERAL EXPENSES OF GLEASON AND GLEASON.   |
| LOCAL RULE 2091-1 (B) DISCLOSURE WITHDRAWAL DDITION, AND SUBSTITUTION OF COUNSEL   |
| FAILURE TO PAY - IN A CASE UNDER CHAPTER 7 OF THE BANKRUPTCY CODE, INCLUDING A CASE CONVERTED FROM CHAPTER 13, WHERE (1) THE DEBTOR'S ATTORNEY HAS AGREED TO REPRESENT THE DEBTOR CONDITIONED ON THE DEBTOR ENTERING INTO AN AGREEMENT AFTER THE FILING OF THE CASE TO PAY THE ATTORNEY FOR SERVICES RENDERED AFTER THE FILING OF THE CASE AND (2) THE DEBTOR REFUSES TO ENTER INTO SUCH AN AGREEMENT, THE COURT MAY ALLOW THE ATTORNEY TO WITHDRAW FROM REPRESENTATION OF THE DEBTOR ON MOTION OF THE ATTORNEY.   |
| DATE CLIENT Dale Cer ATTORNEY  |
| JOINT CLIENT   |

Chase Card Po Box 15298 Wilmington, DE 19850

Community Trust Cu 1313 N Skokie Hwy Gurnee, IL 60031

Convergent Outsourcing 800 Sw 39th St Renton, WA 98057

Credit Coll Po Box 607 Norwood, MA 02062

Diversified Consultant 10550 Deerwood Park Blvd Jacksonville, FL 32256

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Fst Premier 3820 N Louise Ave Sioux Falls, SD 57107

I C System Inc Po Box 64378 Saint Paul, MN 55164

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603

Lvnv Funding Llc Po Box 10497 Greenville, SC 29603

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108 Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Scana Energy Marketing 3344 Peachtree Rd Ne Ste Atlanta, GA 30326

Universal Re 11255 Sunrisegold Rancho Cordova, CA 95742

Wfds/wds Po Box 1697 Winterville, NC 28590

## **United States Bankruptcy Court**Northern District of Illinois

| In re | Dale Lewis                                 |                                       | Case No.                      |                |
|-------|--|---------------------------------------|-------------------------------|----------------|
|       |  | Debtor(s)                             | Chapter 7                     |                |
|       | VE   | RIFICATION OF CREDITOR 1              | MATRIX                        |                |
|       |  | Number of Creditors:15                |                               |                |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of cred | litors is true and correct to | the best of my |
| Date: | December 30, 2016                          | /s/ Dale Lewis                        |                               |                |